

HEALTH QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2018 OF THE CONDITION AND AFFAIRS OF THE

Anthem Health Plans of Maine, Inc.

NAI	C Group Code 0671 0671		Code <u>52618</u> Employer's ID N	lumber31-1705652
Organized under the Laws of	(Current) (Prior) Maine		, State of Domicile or Port of Entry	ME
Licensed as business type:		Ott	ner	
Is HMO Federally Qualified?				
Incorporated/Organized	03/10/2000		Commenced Business	06/05/2000
	2 Gannett Drive		South F	Portland , ME, US 04106-6911
	(Street and Number))	(Oily of 10)	wn, State, Country and Zip Code)
Main Administrative Office		2 Ganne (Street an	ett Drive d Number)	
Sout	th Portland , ME, US 04106-6911			866-583-6182
	Town, State, Country and Zip Code)		(Area	Code) (Telephone Number)
Mail Address	2 Gannett Drive		South F	Portland , ME, US 04106-6911 wn, State, Country and Zip Code)
SO NEWS CONTROL SUPERIOR CONTROL CONTR	(Street and Number or P.O. Bo		2.0	wn, State, Country and 21p Code)
Primary Location of Books and	Records		ett Drive d Number)	
Sout	th Portland , ME, US 04106-6911	(Street an	•	866-583-6182
(City or	Town, State, Country and Zip Code)		• 2000000	Code) (Telephone Number)
Internet Website Address		www.an	hem.com	
Statutory Statement Contact	Dan W	olke	1	317-488-6245
Statutory Statement Services	(Nam	e)	10	Area Code) (Telephone Number) 317-488-6200
	dan.wolke@anthem.com (E-mail Address)			(FAX Number)
	12	OFFI	CERS	
President	Lisa Monaghan Gue		Treasurer	
	Kathleen Susan Ki	efer	Assistant Treasurer	Eric (Rick) Kenneth Noble
		ОТ	HER	
Claudia Elli	is #, Actuary			
			OR TRUSTEES	Kathleen Susan Kiefer
	han Guertin #		Allen Beck Iward Scher #	John Edward Gallina
	ene Kelaghan			
State of	Maine	SS:		
County of	Cumberland			
all of the herein described as statement, together with relate condition and affairs of the sa in accordance with the NAIC rules or regulations require	isets were the absolute property of the de exhibits, schedules and explanation of reporting entity as of the reporting Annual Statement Instructions and Addifferences in reporting not related e scope of this attestation by the desing differences due to electronic filling.	ns therein contained, period stated above, a cocounting Practices a to accounting practices also in g) of the enclosed state	annexed or referred to, is a full and and of its income and deductions the and Procedures manual except to the ces and procedures, according to	ng entity, and that on the reporting period stated above claims thereon, except as herein stated, and that this true statement of all the assets and liabilities and of the refrom for the period ended, and have been complete extent that: (1) state law may differ; or, (2) that state the best of their information, knowledge and belie electronic filing with the NAIC, when required, that is a requested by various regulators in lieu of or in addition. Vincent Edward Scher Treasurer
	500		a. Is this an original filing?	Yes [X] No []
Subscribed and sworn to before day of		3018	b. If no, 1. State the amendment	number
Show	1 - 0		Date filed Number of pages atta	
			c c. paggo atta	

SHARON W. BERRY

Notary Public, Maine My Commission Expires January 8, 2024

ASSETS

		Current Statement Date 4					
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets		
1.	Bonds	270,607,133	0		217,739,541		
	Stocks:						
	2.1 Preferred stocks			0			
	2.2 Common stocks			_			
3.	Mortgage loans on real estate:						
	3.1 First liens			0			
	3.2 Other than first liens			0			
4.	Real estate:						
	4.1 Properties occupied by the company (less \$						
	encumbrances)	72,500	0	72,500	72,500		
	4.2 Properties held for the production of income (less						
	\$ encumbrances)			0			
	4.3 Properties held for sale (less \$						
	encumbrances)			0			
5	Cash (\$(3,013,741)), cash equivalents						
0.	(\$2,488,999) and short-term						
	investments (\$4,291,303)	3 766 561		3,766,561	14 456 693		
6.	Contract loans (including \$ premium notes)			0	14,450,050		
7.	Derivatives premium notes)			0			
8.	Other invested assets			0	137,479		
9.	Receivables for securities			0	107,470		
-	Securities lending reinvested collateral assets			10,770,715			
	Aggregate write-ins for invested assets				0		
	Subtotals, cash and invested assets (Lines 1 to 11)			285,216,909			
	Title plants less \$ charged off (for Title insurers	205,210,303		203,210,303	200,042,400		
13.	only)			0			
4.4	Investment income due and accrued			1,749,267			
		1,743,207		1,749,207	1,910,010		
15.	Premiums and considerations: 15.1 Uncollected premiums and agents' balances in the course of collection.	OF 40F FO4	2 604 026	01 740 560	20 266 002		
		23,433,304	3,094,930	21,740,308	36,200,603		
	15.2 Deferred premiums, agents' balances and installments booked but						
	deferred and not yet due (including \$19,349,834	10 240 224	0	10 240 224	10 601 600		
	earned but unbilled premiums)	19,349,834	0	19,349,834	19,601,623		
	15.3 Accrued retrospective premiums (\$	0 440 007		0 440 007	0 007 704		
	contracts subject to redetermination (\$2,152,747)	2,446,287	0	2,446,287	2,327,761		
16.	Reinsurance:	10.750		10.750	F00 040		
	16.1 Amounts recoverable from reinsurers			19,750			
	16.2 Funds held by or deposited with reinsured companies			0			
47	16.3 Other amounts receivable under reinsurance contracts				20 407 150		
	Amounts receivable relating to uninsured plans				32,487,159		
	Current federal and foreign income tax recoverable and interest thereon			0	829,517		
	Net deferred tax asset			1,019,325	7,487,433		
	Guaranty funds receivable or on deposit			220,481	•		
20.	Electronic data processing equipment and software			0			
21.	Furniture and equipment, including health care delivery assets	4 000 050	4 000 000		_		
	(\$				0		
	Net adjustment in assets and liabilities due to foreign exchange rates			0	16 010 000		
23.	Receivables from parent, subsidiaries and affiliates			0			
24.	Health care (\$			70,364,946			
25.	Aggregate write-ins for other than invested assets	64,946,666	9/9,639	63,967,027	55,489,646		
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	512 596 355	14.596 508	497,999,847	497,962,958		
27.	From Separate Accounts, Segregated Accounts and Protected Cell			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Accounts			0			
28.	Total (Lines 26 and 27)	512,596,355	14,596,508	497,999,847	497,962,958		
	DETAILS OF WRITE-INS						
1101.							
1102.							
1103.							
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0		
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0		
2501.	FEP Assets Held By Agent	63,810,589	0	63,810,589	65,322,456		
2502.	Miscellaneous Receivables		119,419		167, 190		
	Prepaid Expenses	860.220	860,220		0		
	Summary of remaining write-ins for Line 25 from overflow page		0	0	0		
	,	64,946,666	979,639				

LIABILITIES, CAPITAL AND SURPLUS

	LIADILITIES, CAP		Current Period		Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$0 reinsurance ceded)		811,954		
2.	Accrued medical incentive pool and bonus amounts			, , , , , , , , , , , , , , , , , , ,	3,916,151
3.	Unpaid claims adjustment expenses	2,001,366	0	2,001,366	2,627,729
4.	Aggregate health policy reserves, including the liability of				
	\$0 for medical loss ratio rebate per the Public				
	Health Service Act		0		115,228,149
5.	Aggregate life policy reserves				
6.	Property/casualty unearned premium reserve				
7.	Aggregate health claim reserves		0		
8.	Premiums received in advance		0		
9.	General expenses due or accrued	7 ,787 ,797	0	7 ,787 ,797	3,957,937
10.1	Current federal and foreign income tax payable and interest thereon				
	(including \$ on realized gains (losses))				
10.2	Net deferred tax liability				
11.	Ceded reinsurance premiums payable				
12.	Amounts withheld or retained for the account of others		0	208,098	223,825
13.	Remittances and items not allocated	4,265,709	0	4,265,709	15, 194, 771
14.	Borrowed money (including \$ current) and				
	interest thereon \$ (including				
	\$ current)			0	
15.	Amounts due to parent, subsidiaries and affiliates	43,454,571	0	43,454,571	0
16.	Derivatives			0	
17.	Payable for securities	2,600,000	0	2,600,000	
18.	Payable for securities lending	10,770,715	0	10,770,715	5,636,270
19.	Funds held under reinsurance treaties (with \$				
	authorized reinsurers, \$ unauthorized				
	reinsurers and \$ certified reinsurers)			0	
20.	Reinsurance in unauthorized and certified (\$				
	companies			0	
21.	Net adjustments in assets and liabilities due to foreign exchange rates				
22.	Liability for amounts held under uninsured plans			23,209,861	25,231,097
23.	Aggregate write-ins for other liabilities (including \$3, 141, 389				
	current)	5,965,032	0	5,965,032	9,860,650
24.	Total liabilities (Lines 1 to 23)		811,954		
25.	Aggregate write-ins for special surplus funds				
26.	Common capital stock				2,500,000
27.	Preferred capital stock				, ,
28.	Gross paid in and contributed surplus				120.652.900
29.	Surplus notes				
30.	Aggregate write-ins for other than special surplus funds				0
31.	Unassigned funds (surplus)				
32.	Less treasury stock, at cost:				
32.	32.1 shares common (value included in Line 26				
		xxx	VVV		
	32.2 shares preferred (value included in Line 27				
	\$	VVV	VVV		
20	Total capital and surplus (Lines 25 to 31 minus Line 32)		XXX		165,385,260
33.				497,999,847	497,962,958
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	497,999,047	497,902,930
	DETAILS OF WRITE-INS				
2301.	Escheat Liability				1,663,432
2302.	Other premium liability				1,342,510
2303.	FEP Special Advance				2,854,240
2398.	Summary of remaining write-ins for Line 23 from overflow page		0		4,000,468
2399.	Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	5,965,032	0	5,965,032	9,860,650
2501.	Deferred gain on sale-leaseback transaction				12,347,874
2502.	Estimated ACA Health Insurer fee				21,034,623
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page	XXX	xxx	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	11,381,247	33,382,497
3001.		xxx	xxx		
3002.		xxx	XXX		
3003.		XXX	XXX		
3098.	Summary of remaining write-ins for Line 30 from overflow page	xxx	xxx	0	0
3099.	Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0
	,		1	- 1	<u>_</u>

STATEMENT OF REVENUE AND EXPENSES

		Current Year To Date		Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months	XXX			4,670,930
2.	Net premium income (including \$0 non-health				
	premium income)				
3.	Change in unearned premium reserves and reserve for rate credits				
4.	Fee-for-service (net of \$0 medical expenses)				
5.	Risk revenue				
6.	Aggregate write-ins for other health care related revenues				
7.	Aggregate write-ins for other non-health revenues				
8.	Total revenues (Lines 2 to 7)	XXX	/40 , 123 , 863	860,667,675	1, 139, 542, 290
	Hospital and Medical:	E 1E4 406	471 700 040	EGG 20G 600	750 700 241
9.	Hospital/medical benefits				9,849,648
10. 11.	Outside referrals				_
12.	Emergency room and out-of-area				
13.	Prescription drugs				
14.	Aggregate write-ins for other hospital and medical				0
15.	Incentive pool, withhold adjustments and bonus amounts				
16.	Subtotal (Lines 9 to 15)				999, 150, 955
	Less:	, ,	, ,	, ,	
17.	Net reinsurance recoveries			288,332	281,683
18.	Total hospital and medical (Lines 16 minus 17)	6,835,901	628,414,131	742,587,456	998,869,272
19.	Non-health claims (net)				
20.	Claims adjustment expenses, including \$11,288,147 cost				
	containment expenses		19,264,166	18,682,497	31,989,954
21.	General administrative expenses		54,955,187	51,803,998	61,119,570
22.	Increase in reserves for life and accident and health contracts				
	(including \$ increase in reserves for life only)				0
23.	Total underwriting deductions (Lines 18 through 22)				1,091,978,796
24.	Net underwriting gain or (loss) (Lines 8 minus 23)				
25.	Net investment income earned		6,647,877	4,572,499	6,339,836
26.	Net realized capital gains (losses) less capital gains tax of		4 400 470	4 707 440	0 444 500
0.7	\$				
27.	Net investment gains (losses) (Lines 25 plus 26)		8,110,049		8,454,429
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$)				
	(amount charged off \$11,353)]		(11,353)	(20,515)	(89,957)
29.	•			208,286	315,530
30.	Net income or (loss) after capital gains tax and before all other federal			200,200	010,000
00.	income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	46,161,790		56,243,497
31.	Federal and foreign income taxes incurred	XXX	4,504,360	18,334,192	18,502,460
32.	Net income (loss) (Lines 30 minus 31)	XXX	41,657,430	35,624,041	37,741,037
	DETAILS OF WRITE-INS				
0601.		XXX			
0602.		XXX			
0603.		XXX			
0698.	Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699.	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0
0701.		XXX			
0702.		XXX			
0703.		xxx			
0798.	Summary of remaining write-ins for Line 7 from overflow page	xxx	0	0	0
0799.	Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	0
1401.					
1402.					
1403					
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0
2901.	Miscellaneous income (expense)	0	572,715	208,286	315,530
2902.					
2903					
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	572,715	208,286	315,530

STATEMENT OF REVENUE AND EXPENSES (Continued)

1	STATEMENT OF REVENUE AND EX	PENSES (Jonunuec	,
		1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
	CAPITAL AND SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	165,385,260	150,447,929	150 , 447 , 929
34.	Net income or (loss) from Line 32	41,657,430	35,624,041	37,741,037
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$(7,350)	(45, 131)	(115,922)	(209,547)
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax	(8,677,450)	1,570,501	(8,616,087)
39.	Change in nonadmitted assets	3,477,555	(3,967,771)	6,310,763
40	Change in unauthorized and certified reinsurance	0		
41.	Change in treasury stock	0		
42.	Change in surplus notes	0		
43.	Cumulative effect of changes in accounting principles			
44.	Capital Changes:			
	44.1 Paid in	0		
	44.2 Transferred from surplus (Stock Dividend)	0		
	44.3 Transferred to surplus.			
45.	Surplus adjustments:			
	45.1 Paid in	0		
	45.2 Transferred to capital (Stock Dividend)			
	45.3 Transferred from capital			
46.	Dividends to stockholders			(19,000,000)
47.	Aggregate write-ins for gains or (losses) in surplus	(966,626)	(966,626)	(1,288,835)
48.	Net change in capital & surplus (Lines 34 to 47)	35,445,778	32,144,223	14,937,331
49.	Capital and surplus end of reporting period (Line 33 plus 48)	200,831,037	182,592,152	165,385,260
	DETAILS OF WRITE-INS			
4701.	Deferred gain on sale-leaseback transaction	(966,626)	(966,626)	(1,288,835)
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	(966,626)	(966,626)	(1,288,835)

CASH FLOW

	CASITICW		_	
		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations			
1. F	Premiums collected net of reinsurance	747,626,184	869,772,552	1, 148, 550, 362
2. N	Net investment income	6,972,167	5,520,078	6,745,288
3. N	Miscellaneous income	0		
4. T	Total (Lines 1 to 3)	754,598,351	875,292,630	1,155,295,650
5. E	Benefit and loss related payments	699,322,921	727,402,993	962,365,822
6. N	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. (Commissions, expenses paid and aggregate write-ins for deductions	71,728,521	81,843,706	86,498,760
8. E	Dividends paid to policyholders			
9. F	Federal and foreign income taxes paid (recovered) net of \$222,716 tax on capital			
	gains (losses)	(4,459,966)	19,475,501	19,475,500
10. T	Total (Lines 5 through 9)	766,591,476	828,722,200	1,068,340,082
11. N	Net cash from operations (Line 4 minus Line 10)	(11,993,125)	46,570,430	86,955,567
	Cash from Investments			
12. F	Proceeds from investments sold, matured or repaid:			
1	12.1 Bonds	38,290,408	81,395,913	110,436,759
1	12.2 Stocks	0		
1	12.3 Mortgage loans	0		
1	12.4 Real estate	0		
1	12.5 Other invested assets	0		
1	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	(291)	1,067	(1,932)
1	12.7 Miscellaneous proceeds	2,600,000	3,426,691	4,848,866
1	12.8 Total investment proceeds (Lines 12.1 to 12.7)	40,890,117	84,823,671	115,283,693
13. (Cost of investments acquired (long-term only):			
1	13.1 Bonds	90,501,111	85,407,337	137,276,855
1	13.2 Stocks	0		
1	13.3 Mortgage loans	0		
1	13.4 Real estate	0		
1	13.5 Other invested assets	0		
1	13.6 Miscellaneous applications	5,134,445		
1	13.7 Total investments acquired (Lines 13.1 to 13.6)	95,635,556	85,407,337	137,276,855
14. N	Net increase (or decrease) in contract loans and premium notes	0		
15. N	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(54,745,439)	(583,666)	(21,993,162)
	Cash from Financing and Miscellaneous Sources			
16. C	Cash provided (applied):			
1	16.1 Surplus notes, capital notes	0		
	16.2 Capital and paid in surplus, less treasury stock			
1	16.3 Borrowed funds	0		
1	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0		
	16.5 Dividends to stockholders		0	19,000,000
	16.6 Other cash provided (applied)	56,048,433	26,607,681	(24,921,009)
	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	56,048,433	26,607,681	(43,921,009)
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHOOT TEDM INVESTMENTS			
10 N	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS	(10,690,132)	72,594,445	21,041,396
	, , , , , , , , , , , , , , , , , , ,	(10,030,132)	12, 394, 440	21,041,390
	Cash, cash equivalents and short-term investments: 19.1 Beginning of year	14,456,693	(6,584,704)	(6,584,704)
	13.1 Deutitimilu Ut Vedi	14,400,093	(6,584,704)	

Note: Supplemental disclosures of cash flow information for non-cash transactions:		

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Compreh (Hospital &	ensive Medical)	4	5	6	7	8	9	10
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	382,011	24,402	106,009	19,811	136,883	22,703	36 , 168	3,846	0	32 , 189
2. First Quarter	358,254	3,271	101,993	19,951	141,326	22,957	36,207	74	0	32,475
3. Second Quarter	358,856	3, 104	101,772	20,250	141,734	22,626	36,264	75	0	33,031
4. Third Quarter	365,793	2,986	103,047	20,472	142,686	21,800	36,331	77	0	38,394
5. Current Year	0									
6. Current Year Member Months	3,080,351	28,826	921,286	181,281	1,272,654	203,330	326,100	673	0	146,201
Total Member Ambulatory Encounters for Period:										
7 Physician	952,601	14,216	610,564	164,366			162,897	558		
8. Non-Physician	645,433	5,408	212,431	271,482			155,077	1,035		
9. Total	1,598,034	19,624	822,995	435,848	0	0	317,974	1,593	0	0
10. Hospital Patient Days Incurred	43,641	625	19, 188	15,330			8,431	67		
11. Number of Inpatient Admissions	9,873	118	4,652	3,245			1,847	11		
12. Health Premiums Written (a)	738,091,485	19,166,020	507,235,254	35,669,080	5,630,912	6,517,027	156,376,134	789,677	0	6,707,381
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	740 , 166 , 982	19,166,020	508,057,769	35,406,192	5,622,556	6,515,555	157,888,000	803,509	0	6,707,381
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	699,885,989	20,447,276	480,110,046	32,423,088	3,982,802	4,484,426	144,937,785	6,782,691	0	6,717,875
18. Amount Incurred for Provision of Health Care Services	628,414,131	8,032,652	432,297,583	29,350,243	3,954,573	4,424,968	144,239,321	(220,214)	0	6,335,005

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims									
1	2	3	4	5	6	7			
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total			
Claims Unpaid (Reported)						I			
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	7700.000								
0299999 Aggregate accounts not individually listed-uncovered	798,060	10,603	2,056	34	1,201	811,954			
0399999 Aggregate accounts not individually listed-covered	17,259,454	267,483	51,855	848		18,420,918			
0499999 Subtotals	18,057,514	278,086	53,911	882	842,479	19,232,872			
0599999 Unreported claims and other claim reserves						55,085,563			
0699999 Total amounts withheld									
0799999 Total claims unpaid						74,318,435			
0899999 Accrued medical incentive pool and bonus amounts						724,036			

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE									
		Claims Paid Liability			5	6			
	Year to		End of Curre	ent Quarter					
Line of Business	On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year			
Lifte of business	Current Year	During the Year	of Prior Year	During the Year	(Columns 1 + 3)	Prior Year			
Comprehensive (hospital and medical)	95,868,164	412,159,935	534 , 156	49,251,704	96,402,320	107,391,864			
Medicare Supplement	7,462,869	25,524,741	128,685	4,431,705	7,591,554	7,633,238			
3. Dental Only	279,040	4,208,581	21,041	348,702	300,081	429,201			
4. Vision Only	275,742	3,707,060	2,725	276,922	278,467	307,876			
5. Federal Employees Health Benefits Plan	19,322,823	124,535,969	33,772	18,742,644	19,356,595	19,020,443			
6. Title XVIII - Medicare	3,886,083	2,897,009	(82,878)	157, 192	3,803,205	6,960,621			
7 Title XIX - Medicaid	0	0	0	0	0	0			
8. Other health	592,103	6, 125,772	(20,656)	512,084	571,447	874,298			
9. Health subtotal (Lines 1 to 8)	127,686,824	579,159,067	616,845	73,720,953	128,303,669	142,617,541			
10. Healthcare receivables (a)	2, 154, 451	10,719,364	0	0	2, 154, 451	0			
11. Other non-health	0	0	0	0	0	0			
12. Medical incentive pools and bonus amounts	3,753,861	2,160,052	88,952	635,084	3,842,813	3,916,151			
13. Totals (Lines 9-10+11+12)	129,286,234	570,599,755	705,797	74,356,037	129,992,031	146,533,692			

⁽a) Excludes \$61,571,054 loans or advances to providers not yet expensed.

For the purposes of the quarterly interim financial information, it is presumed that the users of the interim financial information have read or have access to the Annual Statement as of December 31, 2017. This presentation addresses only significant events occurring since the last Annual Statement.

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Anthem Health Plans of Maine, Inc. (the "Company") have been prepared in conformity with the National Association of Insurance Commissioners' ("NAIC") *Annual Statement Instructions* and in accordance with accounting practices prescribed by the NAIC *Accounting Practices and Procedures Manual* ("NAIC SAP"), subject to any deviations prescribed or permitted by the Maine Bureau of Insurance (the "Bureau").

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the Bureau is shown below:

	SSAP#	F/S Page	F/S Line #	September 30, 2018	December 31, 2017
Net Income					
(1) Anthem Health Plans of Maine, Inc. state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ 41,657,430	\$ 37,741,037
(2) State Prescribed Practices that is an increase/(decrease) from NAIC SAP:					
(3) State Permitted Practices that is an increase/(decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 41,657,430	\$ 37,741,037
Surplus					
(5) Anthem Health Plans of Maine, Inc. state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$200,831,037	\$165,385,260
(6) State Prescribed Practices that is an increase/(decrease) from NAIC SAP:					
(7) State Permitted Practices that is an increase/(decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$200,831,037	\$165,385,260

B. Use of Estimates in the Preparation of the Financial Statements

Preparation of financial statements requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates. During 2018, the Company had a change in estimate relating to the Tax Cuts and Jobs Act that resulted in a net increase of \$6,355,889 of deferred tax assets and liabilities.

C. Accounting Policies

- (1) (5) No significant change.
- (6) Loan-backed securities are stated at amortized cost. Pre-payment assumptions for loan-backed securities and structured securities were obtained from broker-dealer survey values or internal estimates. These assumptions are consistent with the current interest rate and economic environment. The retrospective adjustment method is used to value all loan-backed securities. Non-investment grade loan-backed securities are stated at the lower of amortized cost or fair value.
- (7) (16) No significant change.

D. Going Concern

Not applicable.

2. Accounting Changes and Corrections of Errors

Not applicable.

3. Business Combinations and Goodwill

Not applicable.

4. Discontinued Operations

Not applicable.

5. Investments

A. - C.

Not applicable.

D. Loan-Backed Securities

- (1) Prepayment assumptions for single-class and multi-class mortgage-backed and asset-backed securities were obtained from broker-dealer survey values or internal estimates. The Company used various third-party pricing sources in determining the market value of its loan-backed securities.
- (2) The Company did not recognize other-than-temporary impairments on its loan-backed securities during the nine months ended September 30, 2018.
- (3) The Company did not hold other-than-temporary impairments on its loan-backed securities at September 30, 2018.
- (4) The Company had no impaired securities for which an other-than-temporary impairment had not been recognized in earnings as a realized loss at September 30, 2018.
- (5) The Company had no impaired loan-backed securities at September 30, 2018.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

- (1) Not applicable.
- (2) No significant change.

(3) Collateral Received

- a. No significant change.
- b. The fair value of that collateral and of the portion of that collateral that it has sold or repledged

\$ 10,776,866

- c. No significant change.
- (4) Not applicable.
- (5) No significant change.
- (6) Not applicable.
- (7) Not applicable.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into repurchase agreement transactions accounted for as secured borrowing at September 30, 2018.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into reverse repurchase agreement transactions accounted for as a secured borrowing at September 30, 2018.

H. Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into repurchase agreement transactions accounted for as a sale at September 30, 2018.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into reverse repurchase agreement transactions accounted for as a sale at September 30, 2018.

J. Real Estate

No significant change.

K. Investments in Low-Income Housing Tax Credits

No significant change.

L. Restricted Assets

No significant change.

M. Working Capital Finance Investments

Not applicable.

N. Offsetting and Netting of Assets and Liabilities

The Company had no netted assets and liabilities at September 30, 2018.

O. Structured Notes

Not applicable.

P. 5* Securities

The Company has no 5* Securities as of September 30, 2018.

Q. Short Sales

The Company did not have any short sales at September 30, 2018.

R. Prepayment Penalty and Acceleration Fees

(1) Number of CUSIPs 1
(2) Aggregate Amount of Investment Income \$ 39,281

6. Joint Ventures, Partnerships and Limited Liability Companies

No significant change.

7. Investment Income

No significant change.

8. Derivative Instruments

Not applicable.

9. Income Taxes

A. - F.

No significant change.

G.

The Company has a tax loss contingency in the amount of \$5,281,841 to offset a tax benefit due to an accelerated tax deduction taken on the 2017 consolidated tax return related to prepaid property and services. The accelerated deduction requires approval by the Internal Revenue Service prior to taking the deduction.

10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. - C.

No significant change.

D. Amounts Due to or from Related Parties

At September 30, 2018, the Company reported no amounts due from affiliates and \$43,454,571 due to affiliates. The payable balance represents intercompany transactions that will be settled in accordance with the settlement terms of the intercompany agreement.

E. - N.

No significant change.

11. Debt

Not applicable.

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan

Not applicable.

- B. Not applicable.
- C. Not applicable.
- **D.** Not applicable.

E. Defined Contribution Plans

Not applicable.

F. Multiemployer Plans

The Company does not participate in a multiemployer plan.

G. Consolidated/Holding Company Plans

No significant change.

H. Post Employment Benefits and Compensated Absences

Not applicable.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not applicable.

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

(1) - (8)

No significant change.

(9) Changes in Special Surplus Funds

The change in balances of special surplus funds from the prior year are due to changes in the amounts segregated for the estimated Affordable Care Act ("ACA") health insurer fee. As of September 30, 2018, the Company fully expensed the estimated 2018 insurer fee. The insurer fee was suspended for 2019.

(10) - (13)

No significant change.

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

No significant change.

B. Assessments

(1) - (2)

No significant change.

- (3) Guaranty Fund Liabilities and Assets Related to Insolvencies of Entities That Wrote Long-Term Care Contracts
 - a. Discount Rate Applied

3.5%

b. The Undiscounted and Discounted Amount of the Guaranty Fund Assessments and Related Assets by Insolvency:

	Guaranty Fu	nd Assessment	Related	l Assets
Name of the Insolvency	Undiscounted	Discounted	Undiscounted	Discounted
Penn Treaty Network America Insurance Company and its subsidiary, American Network Insurance Company (collectively "Penn Treaty")	\$ 272,124	\$ 189,026	\$ 267,266	\$ 220,481

c. Number of Jurisdictions, Ranges of Years Used to Discount and Weighted Average Number of Years of the Discounting Time Period for Payables and Recoverables by Insolvency:

]	Payables		Recoverables					
Name of the Insolvency	Number of Jurisdictions			Number of Jurisdictions	0	Weighted Average Number of Years			
Penn Treaty	1	1-20	10.5	1	1-26	9.0			

C. - F.

No significant change.

15. Leases

No significant change.

16. Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

Not applicable.

- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities
 - A. Transfers of Receivables Reported as Sales

Not applicable.

B. Transfer and Servicing of Financial Assets

- (1) The Company participates in a securities lending program whereby marketable securities in its investment portfolio are transferred to independent brokers or dealers. At September 30, 2018 the fair value of securities loaned was \$10,553,713 and the carrying value of securities loaned was \$10,560,571.
- (2) (7) Not applicable.

C. Wash Sales

- (1) In the course of the Company's asset management, securities may be sold and reacquired within 30 days of the sale date to enhance the yield on the investments.
- (2) At September 30, 2018, there were no wash sales involving securities with an NAIC designation of 3 or below or unrated.

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. Administrative Services Only Plans

No significant change.

B. Administrative Services Contract Plans

No significant change.

C. Medicare or Other Similarly Structured Cost-Based Reimbursement Contract

No significant change.

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not applicable.

20. Fair Value Measurements

A.

(1) Fair Value Measurement at Reporting Date

Description for each class of asset or liability	(Lev	/el 1)	(Level 2)	(L	evel 3)	Total	V ("I Inc	t Asset Value NAV") Cluded Level 2
a. Assets at fair value								
Bonds								
Industrial and misc	\$	_	\$3,036,601	\$	_	\$3,036,601	\$	_
Total bonds	\$	_	\$3,036,601	\$	_	\$3,036,601	\$	
Total assets at fair value	\$		\$3,036,601	\$		\$3,036,601	\$	

(2) Fair Value Measurement in (Level 3) of the Fair Value Hierarchy

There are no investments in Level 3 as of September 30, 2018.

- (3) The Company's policy is to recognize transfers between Levels, if any, as of the beginning of the reporting period.
- (4) Fair values of bonds are based on quoted market prices, where available. These fair values are obtained primarily from third party pricing services, which generally use Level 1 or Level 2 inputs, for the determination of fair value to facilitate fair value measurements and disclosures. Level 2 securities primarily include United States government securities, corporate securities, securities from states, municipalities and political subdivisions, residential mortgage-backed securities and certain other asset-backed securities. For securities not actively traded, the pricing services may use quoted market prices of comparable instruments or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include, but are not limited to, broker quotes, benchmark yields, credit spreads, default rates and prepayment speeds. The Company has controls in place to review the pricing services' qualifications and procedures used to determine fair values. In addition, the Company periodically reviews the pricing services' pricing methodologies, data sources and pricing inputs to ensure the fair values obtained are reasonable.

Cash equivalents primarily consist of highly rated money market funds or bonds with original maturities of three months or less. Due to the high ratings and short-term nature of these investments, cash equivalents are primarily designated as Level 1.

There have been no significant changes in the valuation techniques during the current period.

B. Fair Value Measurements Under Other Accounting Pronouncements

Not applicable.

C. Financial Instruments

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)	Net Asset Value ("NAV") Included in Level 2
Bonds	\$ 265,766,488	\$ 270,607,133	\$	\$ 265,766,488	\$	s —	\$ —
Cash equivalents	2,488,798	2,488,999	_	2,488,798	_	_	_
Short-term investments	4,291,303	4,291,303	_	4,291,303	_	_	_
Securities lending collateral asset	10,776,866	10,770,715	7,527,193	3,249,673	_	_	_

D. Not Practicable to Estimate Fair Value

There are no financial instruments that were not practicable to estimate at fair value.

21. Other Items

No significant change.

22. Events Subsequent

Subsequent events have been considered through November 12, 2018 for the statutory statement issued on November 13, 2018. There were no events occurring subsequent to September 30, 2018 requiring recognition or disclosure.

23. Reinsurance

No significant change.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. - D.

No significant change.

E. Risk Sharing Provisions of the Affordable Care Act ("ACA")

(1)	Did Aff	the reporting entity write accident and health insurance premium that is subject to the ordable Care Act risk sharing provisions (YES/NO)?	Yes
(2)	Imp and	pact of Risk-Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities Revenue for the Current Year	
	a.	Permanent ACA Risk Adjustment Program Assets	
		Assets	
		1. Premium adjustments receivable due to ACA Risk Adjustment (including high risk pool payments)	\$ 1,924,416
		Liabilities	
		2. Risk adjustment user fees payable for ACA Risk Adjustment	\$ 19,178
		3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premiums)	\$ 243,393
		Operations (Revenue & Expense)	
		Reported as revenue in premium for accident and health contracts (written/ 4. collected) due to ACA Risk Adjustment	\$ 883,101
		5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	\$ 19,965
	b.	Transitional ACA Reinsurance Program	
		Assets	
		1. Amounts recoverable for claims paid due to ACA Reinsurance	\$ 19,750
		2. Amounts recoverable for claims unpaid due to ACA Reinsurance (contra liability)	\$
		Amounts receivable relating to uninsured plans for contributions for ACA 3. Reinsurance	\$ _
		Liabilities	
		Liabilities for contributions payable due to ACA Reinsurance - not reported as 4. ceded premium	\$ _
		5. Ceded reinsurance premiums payable due to ACA Reinsurance	\$ _
		Liability for amounts held under uninsured plans contributions for ACA 6. Reinsurance	\$ _
		Operations (Revenue & Expense)	
		7. Ceded reinsurance premiums due to ACA Reinsurance	\$ _
		Reinsurance recoveries (income statement) due to ACA Reinsurance payments or 8. expected payments	\$ _
		9. ACA Reinsurance contributions - not reported as ceded premium	\$
	c.	Temporary ACA Risk Corridors Program	
		Assets	
		Accrued retrospective premium due to ACA Risk Corridors	\$
		Liabilities	
		Reserve for rate credits or policy experience rating refunds due to ACA Risk 2. Corridors	\$ _
		Operations (Revenue & Expense)	
		3. Effect of ACA Risk Corridors on net premium income (paid/received)	\$ _
		4. Effect of ACA Risk Corridors on change in reserves for rate credits	\$
		ine items where the amount is zero is due to no balance and/or no activity as of the porting date.	

(3) Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance.

			Prior Ye	ar c	Ouring the on Business Before	1	Received or Paid as of the Current Year on Business Written Before		es	Adjustments				Unsettled Balances as of the Reporting Date					
			Decem	ıbeı	r 31 of the Year		December Prior	31 of the		Prior Year Accrued Less Payments Col 1 - 3)	A Pa	ior Year ccrued Less syments ol 2 - 4)	To Prior Year Balances	To Prior Year Balances		fro	mulative Balance om Prior Years of 1 - 3 + 7)	Bala from Ye (Col 2	llative ance Prior ars 2 - 4 +
			1		2	╀	3	4	╀	5	L	6	7	8		L	9	1	0
			Receivab	le	(Payable)	R	eceivable	(Payable)	R	Receivable	(P	ayable)	Receivable	(Payable)	Ref	Re	ceivable	(Pay	able)
a.		nanent ACA Risk ustment Program																	
	1.	Premium adjustments receivable (including high risk pool payments)	\$1,152,8	46	s –	- \$		s —	- \$	1,152,846	\$		\$(1,152,846)	s <u> </u>	A	\$		\$	
	2.	Premium adjustments (payable) (including high risk pool premiums)	\$ -	_	\$ 9,070,115	5 \$	_	\$8,715,191	\$	_	\$	354,924	\$ —	\$ (354,924)	В	\$	_	\$	
	3.	Subtotal ACA Permanent Risk Adjustment Program	\$1,152,8	46	\$ 9,070,115	5 \$	_	\$8,715,191	\$	1,152,846	\$	354,924	\$(1,152,846)	\$ (354,924)		\$	_	\$	
b.		nsitional ACA nsurance Program																	
	1.	Amounts recoverable for claims paid	\$ 582,8	18	\$ _	- \$	563,068	s <u> </u>	\$	19,750	\$		s —	<u> </u>	С	\$	19,750	\$	
	2.	Amounts recoverable for claims unpaid (contra liability)	\$ -	_	\$ -	- \$	_	s –	- \$	_	\$	_	\$ <u> </u>	s <u> </u>	D	\$	_	\$	
	3.	Amounts receivable relating to uninsured plans	\$	_	\$ —	- \$	_	s —	- \$	_	\$	_	s —	s –	Е	\$	_	\$	_
	4.	Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium	\$		s –	- \$	_	s —	- \$	_	\$		\$ —	s —	F	\$	_	\$	_
	5.	Ceded reinsurance premiums payable	\$ -		\$ -	- \$	_	s –	- \$	_	\$	_	s —	s —	G	\$	_	\$	_
	6	Liability for amounts held under uninsured plans	\$		\$ —	- \$	_	s –	- \$	_	\$	_	\$ —	s –	Н	\$	_	\$	
	7.	Subtotal ACA Transitional Reinsurance Program	\$ 582,8	18	s –	- \$	563,068	s —	- \$	19,750	\$	_	s —	s –		\$	19,750	\$	_
c.		nporary ACA Risk ridors Program																	
	1.	Accrued retrospective premium	\$	_	\$ -	- \$		s –	\$		\$		s —	<u> </u>	Ι	\$		\$	
	2.	Reserve for rate credits or policy experience rating refunds	\$ -		s –	- \$	_	s —	- \$		\$		\$ <u> </u>	s <u> </u>	J	\$	_	\$	
	3.	Subtotal ACA Risk Corridors Program	\$		\$ _	- \$	_	s –	- \$	_	\$	_	\$ —	\$ —		\$	_	\$	_
d.		al for ACA Risk ring Provisions	\$1,735,6	64	\$ 9,070,115	5 \$	563,068	\$8,715,191	\$	1,172,596	\$	354,924	\$(1,152,846)	\$ (354,924)		\$	19,750	\$	_

Explanations of adjustments

- A Adjustments were made to reflect the ending balance in the Centers for Medicare & Medicaid Services "Summary Report on Permanent Risk Adjustment Transfers for the 2017 Benefit Year."
- B Adjustments were made to reflect the ending balance in the Centers for Medicare & Medicaid Services "Summary Report on Permanent Risk Adjustment Transfers for the 2017 Benefit Year."
- C Not applicable.
- D Not applicable.
- E Not applicable.
- F Not applicable.
- G Not applicable
- H Not applicable.I Not applicable.
- J Not applicable.

(4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year..

Risk	Corridors Program Year	Accrued Prior Yea	on Bu	isiness	the	Curren	Paid as of Year on		Differe	ences		Adj	ustments			tled Ba		
		Decemb	en Befo er 31 o or Year	of the			tten Before 31 of the Year	Accr Les Paym	Prior Year Accrued Less Payments (Col 1 - 3) Accrued Less (Col 2 - 4)		To Prior Year Balances To Prior Year Balances			Cumul Bala from Yea (Col 1	rior rs - 3 +	Bal from Yo (Col	ulative ance i Prior ears 2 - 4 + 8)	
1		1		2	3	3	4	5		6		7	8		9			10
İ		Receivab	e (Pa	yable)	Recei	ivable	(Payable)	Receiv	vable	(Payabl	e)	Receivable	(Payable)	Ref	Receiv	able	(Pay	/able)
a.	2014		•															
1.	Accrued retrospective premium	\$ -	- \$	_	\$		s —	\$	_	\$	_	\$ —	s –	A	\$	_	\$	
2.	Reserve for rate credits for policy experience rating refunds	\$ -	- \$	_	\$	_	s —	\$	_	\$	_	\$ —	s —	В	\$	_	\$	_
b.	2015																	
1.	Accrued retrospective premium	\$ -	- \$	_	\$	_	s —	\$	_	\$	_	s —	s —	С	\$	_	\$	_
2.	Reserve for rate credits for policy experience rating refunds	\$ -	- \$	_	\$	_	\$ —	\$	_	\$	_	s —	s –	D	\$	_	\$	_
c.	2016																	
1.	Accrued retrospective premium	\$ -	- \$	_	\$	_	\$ —	\$	_	\$	_	\$ —	s –	Е	\$	_	\$	_
2.	Reserve for rate credits for policy experience rating refunds	\$ -	- \$	_	\$	_	s –	\$	_	\$	_	s —	s –	F	\$	_	\$	_
d.	Total for Risk Corridors	\$ -	- \$	_	\$	_	\$ —	\$	_	\$	_	\$ —	s –		\$	_	\$	_

Explanations of adjustments

- A Not applicable.
- B Not applicable.
- C Not applicable.
- D Not applicable.
- E Not applicable.
- F Not applicable.

24E(4)d (Columns 1 through 10) should equal 24E(3)c3 (Column 1 through 10 respectively)

(5) ACA Risk Corridors Receivable as of Reporting Date.

	Risk Corridors Program Year	Estimated A to be Filed of Amount File CMS	or Final ed with	Non-Accrued Amounts for Impairment or Other Reasons	A	3 Amounts received from CMS	Asset Balance (Gross of Non- admissions) (1 - 2 - 3)	5 Non-admitted Amount	6 Net Admitted Asset (4 - 5)
a.	2014	\$		\$ -	- \$		s —	s —	s —
b.	2015	\$	_	\$ -	- \$	_	s —	\$ —	s —
c.	2016	\$	_	\$ -	- \$	_	\$ —	\$	s —
d.	Total $(a + b + c)$	\$	_	\$ -	- \$	_	s —	\$ —	s —

24E(5)d (Columns 4) should equal 24E(3)c1 (Column 9) 24E(5)d (Columns 6) should equal 24E(2)c1

25. Change in Incurred Claims and Claim Adjustment Expenses

- **A.** The estimated cost of claims and claim adjustment expense attributable to insured events of prior years decreased by \$14,897,263 during 2018. This is approximately 10.0% of unpaid claims and claim adjustment expenses of \$149,161,421 as of December 31, 2017. The redundancy reflects the decreases in estimated claims and claims adjustment expenses as a result of claims payment during the year, and as additional information is received regarding claims incurred prior to 2018. Recent claim development trends are also taken into account in evaluating the overall adequacy of unpaid claims and unpaid claim adjustment expense.
- **B.** There were no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

26. Intercompany Pooling Arrangements

Not applicable.

27. Structured Settlements

Not applicable.

28. Health Care Receivables

No significant change.

29. Participating Policies

Not applicable.

30. Premium Deficiency Reserves

The Company did not record any premium deficiency reserves at September 30, 2018.

31. Anticipated Salvage and Subrogation

No significant change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Did the reporting entity experience any material transactions requiring the Domicile, as required by the Model Act?					Yes []	No [Х]				
1.2	If yes, has the report been filed with the domiciliary state?					Yes []	No []				
2.1	Has any change been made during the year of this statement in the charte reporting entity?					Yes []	No [Х]				
2.2	If yes, date of change:												
3.1	Is the reporting entity a member of an Insurance Holding Company System is an insurer? If yes, complete Schedule Y, Parts 1 and 1A.					Yes [Х]	No []				
3.2	Have there been any substantial changes in the organizational chart since	e the prior quarter end?				Yes []	No [Х]				
3.3	If the response to 3.2 is yes, provide a brief description of those changes.												
3.4	Is the reporting entity publicly traded or a member of a publicly traded grou	up?				Yes [Х]	No []				
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code issu	ued by the SEC for the entity/group				0	00115	6039					
4.1	Has the reporting entity been a party to a merger or consolidation during the	the period covered by this statement?				Yes []	No [Χ]				
4.2	ceased to exist as a result of the merger or consolidation.												
	1 Name of Entity	2 NAIC Company Code St	3 ate of Domicile	9									
5.	If the reporting entity is subject to a management agreement, including thir in-fact, or similar agreement, have there been any significant changes reg If yes, attach an explanation.				Yes [] No	[X] N/A	. []				
6.1	State as of what date the latest financial examination of the reporting entity	ty was made or is being made			· <u>-</u>	1	2/31/	2017					
6.2	State the as of date that the latest financial examination report became avidate should be the date of the examined balance sheet and not the date					1	2/31/	2013					
6.3	State as of what date the latest financial examination report became availathe reporting entity. This is the release date or completion date of the exadate).	amination report and not the date of the e	examination (b	alance sh	eet	0	6/29/	′2015					
6.4	By what department or departments?												
6.5	State of Maine Bureau of Insurance Have all financial statement adjustments within the latest financial examina statement filed with Departments?	nation report been accounted for in a subs	sequent financ	al	Yes [] No]] N/A	4 [X]				
6.6	Have all of the recommendations within the latest financial examination rep	eport been complied with?			Yes [] No	[] N/A	A [X]				
7.1	Has this reporting entity had any Certificates of Authority, licenses or regist revoked by any governmental entity during the reporting period?	strations (including corporate registration,	if applicable)	suspende	d or	Yes []	No [Х]				
7.2	If yes, give full information:												
8.1	Is the company a subsidiary of a bank holding company regulated by the F	Federal Reserve Board?				Yes []	No [Х]				
8.2	If response to 8.1 is yes, please identify the name of the bank holding com	npany.											
8.3	Is the company affiliated with one or more banks, thrifts or securities firms'	??				Yes []	No [Х]				
8.4	If response to 8.3 is yes, please provide below the names and location (cit regulatory services agency [i.e. the Federal Reserve Board (FRB), the Of Insurance Corporation (FDIC) and the Securities Exchange Commission	office of the Comptroller of the Currency (DCC), the Fed	eral Depo									
	1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC							
		, , ,				1	1						

GENERAL INTERROGATORIES

9.1	l 	Yes [X] No [[]								
9.11	(e) Accountability for adherence to the code. If the response to 9.1 is No, please explain:										
9.2 9.21	Has the code of ethics for senior managers been amended? If the response to 9.2 is Yes, provide information related to amendment(s). Administrative changes were made in February 2018 to update the President & CEO letter, and to clarify our sexu			Yes [X] No [[]						
9.3 9.31	9.3 Have any provisions of the code of ethics been waived for any of the specified officers?										
	FINANCIAL										
10.1 10.2		Yes [] No [
	INVESTMENT										
11.1 11.2	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or o use by another person? (Exclude securities under securities lending agreements.)			Yes [] No [[X]						
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:		\$								
13.	Amount of real estate and mortgages held in short-term investments:		\$								
14.1	Does the reporting entity have any investments in parent, subsidiaries and affiliates?			Yes [] No [[X]						
14.2	If yes, please complete the following:										
		1 Prior Year-End Book/Adjusted Carrying Value		2 Current Qu Book/Adju Carrying V	sted alue						
	Bonds			\$							
	Preferred Stock			\$							
	Common Stock			\$							
	Short-Term Investments			\$							
	All Other			\$ \$							
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)			\$							
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above	\$		Ψ \$							
	Has the reporting entity entered into any hedging transactions reported on Schedule DB?										

GENERAL INTERROGATORIES

16.		-	program, state the amount of the		-		•	10 770 00
			invested collateral assets report					
	16.2 Total bo	ok adjusted	/carrying value of reinvested coll	ateral	assets reported on Schedule	DL, Parts 1 and 2	\$	10,770,71
17. 17.1	Excluding items in Schedule E offices, vaults or safety depor custodial agreement with a q Outsourcing of Critical Functi	E - Part 3 - S sit boxes, w ualified ban ons, Custo	curities lending reported on the I Special Deposits, real estate, mo ere all stocks, bonds and other s ik or trust company in accordant dial or Safekeeping Agreements equirements of the NAIC Financia	rtgage securi ce with	e loans and investments held ties, owned throughout the cu h Section 1, III - General Exan NAIC Financial Condition Ex	physically in the reporting entit rrent year held pursuant to a nination Considerations, F. aminers Handbook?	y's	[X] No []
		1				2		
	Nan	ne of Custo	dian(s)	202	Custod	ian Address		
	JP MOT GATT CHASE BATIK, N.A			303	Madison Ave, New Tork, NT 10	1/9		
17.2	For all agreements that do not location and a complete expl		h the requirements of the NAIC I	Finan	cial Condition Examiners Han	dbook, provide the name,		
	1 Name(s)		2 Location(s)		Comple	3 ete Explanation(s)		
			, ,		•	, , ,		
17.3 17.4	Have there been any changes If yes, give full information rela		name changes, in the custodian(s) ide	ntified in 17.1 during the curre	nt quarter?	. Yes	[] No [X]
	1		2		3	4		
	Old Custodian		New Custodian		Date of Change	Reason		
	Anthem, Inc. McDonnell Investment Manageme Pacific Investment Manageme 17.5097 For those firms/individesignated with a "U"	ne of Firm of the company duals listed manage runaffiliated	in the table for Question 17.5, do nore than 10% of the reporting entity (i.e. desi aggregate to more than 50% of the	o any	2 Affiliation I U U firms/individuals unaffiliated wassets?	for Question 17.5, does the		5 [X] No []
17.6	For those firms or individuals I table below.	isted in the	table for 17.5 with an affiliation of	code d	of "A" (affiliated) or "U" (unaffil	ated), provide the information	for the	
	1		2		3	4		5 Investment
	Central Registration Depository Number		Name of Firm or Individual		Legal Entity Identifier (LEI)			Management Agreement (IMA) Filed
	113878 104559							
18.1 18.2	Have all the filing requirement If no, list exceptions:	s of the Pur	poses and Procedures Manual c	of the	NAIC Investment Analysis Off	ice been followed?	Yes	[X] No []
19.	a. Documentation necess b. Issuer or obligor is current.	ary to perm ent on all co al expectat	porting entity is certifying the follit a full credit analysis of the secton tracted interest and principal pilon of ultimate payment of all colf securities?	urity d	loes not exist. nts.	nated 5*GI security:	Yes	No [X]

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:

	1.1 A&H loss percent		86.4 %
	1.2 A&H cost containment percent		1.5 %
	1.3 A&H expense percent excluding cost containment expenses		8.5 %
2.1	Do you act as a custodian for health savings accounts?		Yes [] No [X]
2.2	If yes, please provide the amount of custodial funds held as of the reporting date	\$	
2.3	Do you act as an administrator for health savings accounts?		Yes [] No [X]
2.4	If yes, please provide the balance of the funds administered as of the reporting date	.\$	
3.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?		Yes [] No [X]
3.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?		Yes [] No [X]

Showing All New Reinsurar	nce Treaties -	- Current Ye	ear to Date	

	Showing All New Reinsurance Treaties - Current Year to Date 1											
1	2	3 4	5	6	7	8 Certified	9 Effective Date of					
NAIC Company Code	ID	Effective	Domiciliary	Type of Reinsurance Ceded		Reinsurer Rating	Certified Reinsurer					
Code	Number	Date Name of Reinsurer	Jurisdiction	Ceded	Type of Reinsurer	(1 through 6)	Rating					
												
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SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories Direct Business Only Federal Employees Life and Health Annuity Premiums & Other Property/ Casualty Active Accident and **Benefits** Total Status Health Medicaid Program Columns 2 Deposit-Type Premiums States, etc (a) Title XVIII Title XIX Premiums Consideration Premiums Through 7 Contracts 1. Alabama ALN. Alaska. 2. AK N 0 3. Arizona. ΑZ .N. 0 4. Arkansas AR N 0 California .. 5. CA N 0 6. Colorado. 0 CO N 7. Connecticut CT N 0 8. Delaware. 0 DE N District of Columbia . DC 9. N 0 10. Florida .. FL N. 0 Georgia 11. .. GA N 0 12. Hawaii ... ΗΙ .N. 0 13. Idaho .. ID N 0 Illinois 14. Ш N 0 15. Indiana .. IN N 0 16. lowa .. IΑ N 0 17. Kansas KS N. 0 18. Kentucky. ΚY N 0 19. Louisiana. LA .N. 0 738.091.485 20. Maine. MF L 580.925.674 789.677 156.376.134 21. Maryland .. MD N. 0 22. Massachusetts .. MA N 0 23. Michigan .. MI N 0 24. Minnesota 0 MN N Mississippi .. 25. MS N 0 26. Missouri . 0 MO N. 27. Montana. . MT N 0 28. Nebraska .. NE .N. 0 29. Nevada NV N 0 30. New Hampshire NH N 0 New Jersey ... 31. . NJ N 0 32. New Mexico .. . NM N 0 33. New York .. - NY N 0 North Carolina ... 34. NC N 0 35. North Dakota ND .N. 0 36. Ohio. ОН N 0 37. Oklahoma OK .N. 0 38. Oregon .. OR N 0 39. Pennsylvania PA N 0 40. Rhode Island 0 RI N South Carolina 41. .. SC N 0 42. South Dakota ... 0 SD N. 43. Tennessee TN N 0 44. Texas. 0 TX .N. 45. Utah ... UT N 0 46. Vermont .. VT N. 0 47. Virginia .. VA N 0 48. Washington. WA N 0 West Virginia .. 49. . WV N 0 Wisconsin 50. WI N 0 51. Wyoming. WY N. 0 American Samoa AS 52. N 0 53. Guam .. GU .N. 0 Puerto Rico .. 54. PR N 0 55. U.S. Virgin Islands ... VI N 0 Northern Mariana 56. N 0 Islands MP 57. Canada CAN N 0 Aggregate Other 58. 0 OT XXX 0 0 0 0 0 0 0 59. 580.925.674 156.376.134 738 091 485 Subtotal XXX 789 677 0 0 0 0 Reporting Entity 60. Contributions for Employee Benefit Plans XXX Totals (Direct Business) 0 738,091,485 0 61. 580,925,674 789,677 156,376,134 XXX **DETAILS OF WRITE-INS** 58001 XXX 58002. XXX 58003 Summary of remaining 58998. write-ins for Line 58 from overflow page Totals (Lines 58001 through .0 .0 ..0 .0 XXX .0 0. 58999. 58003 plus 58998)(Line 58 0 0 0 0 0 0 0 above) XXX

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R - Registered - Non-domiciled RRGs.

Q - Qualified - Qualified or accredited reinsurer.

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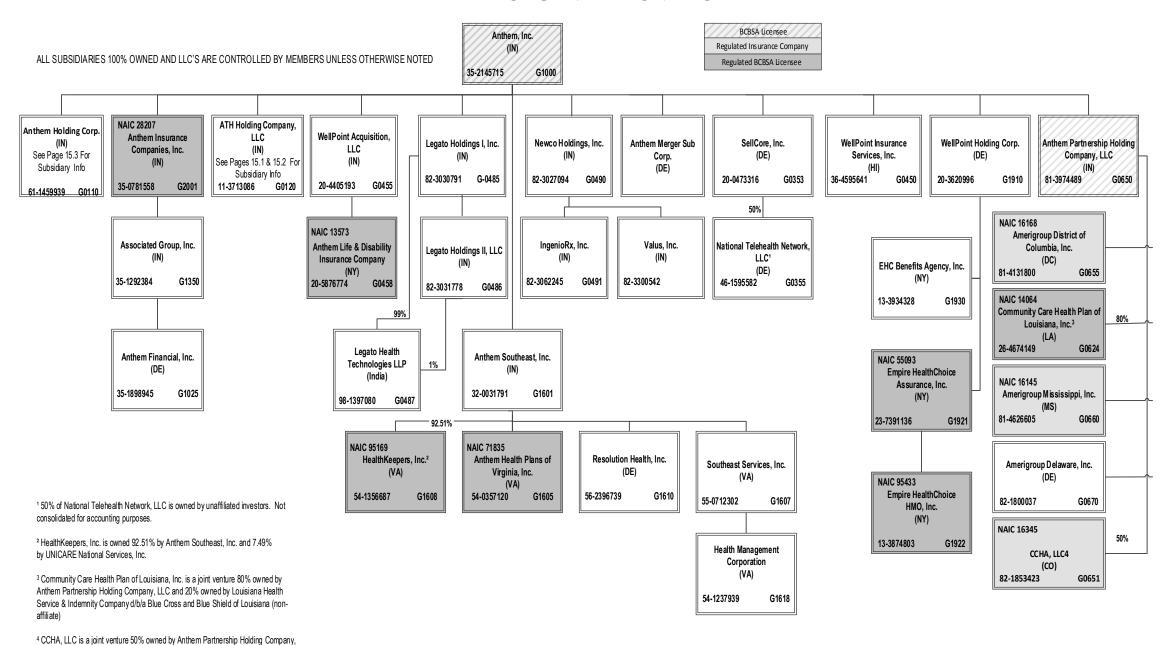
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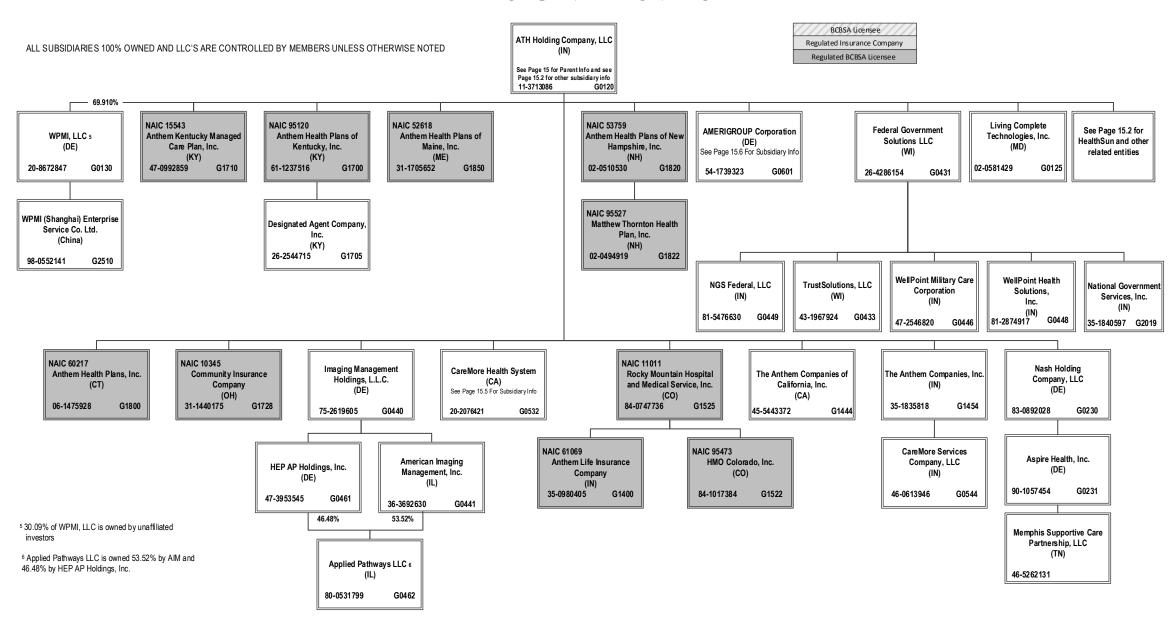
L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG...

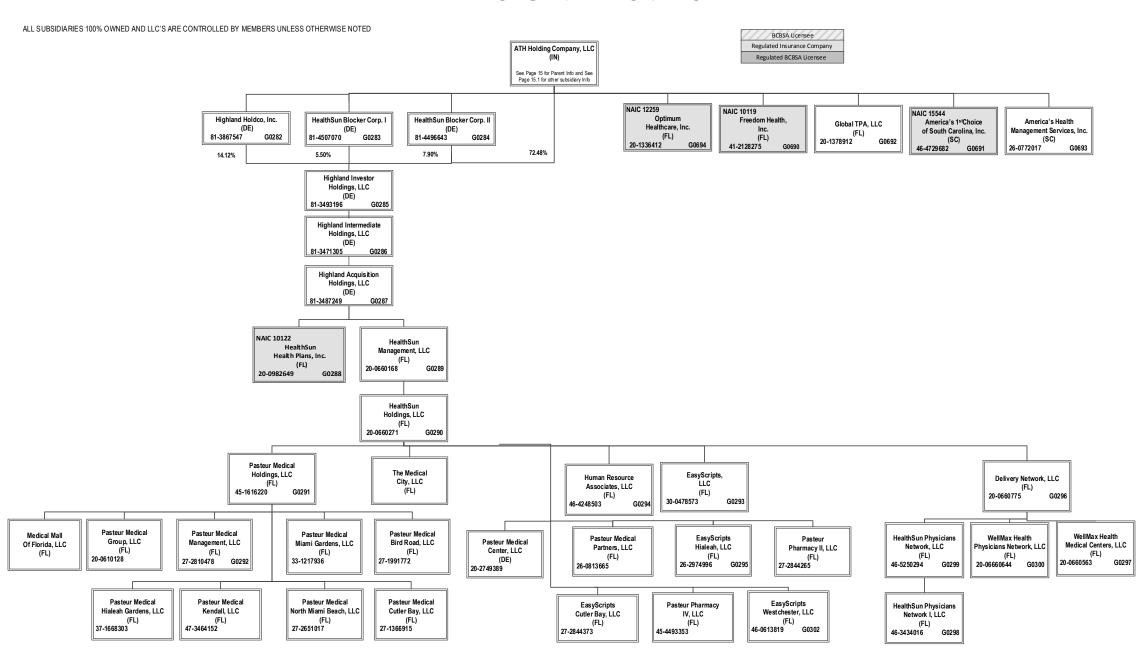
N - None of the above - Not allowed to write business in the state.

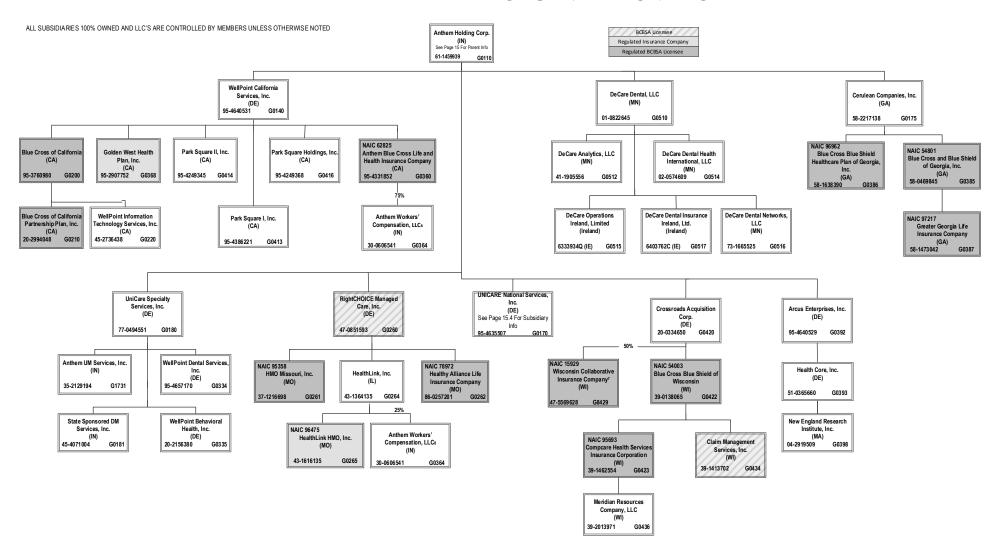
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state....

LLC and 50% owned by Colorado Community Health Alliance, LLC (non-affiliate)



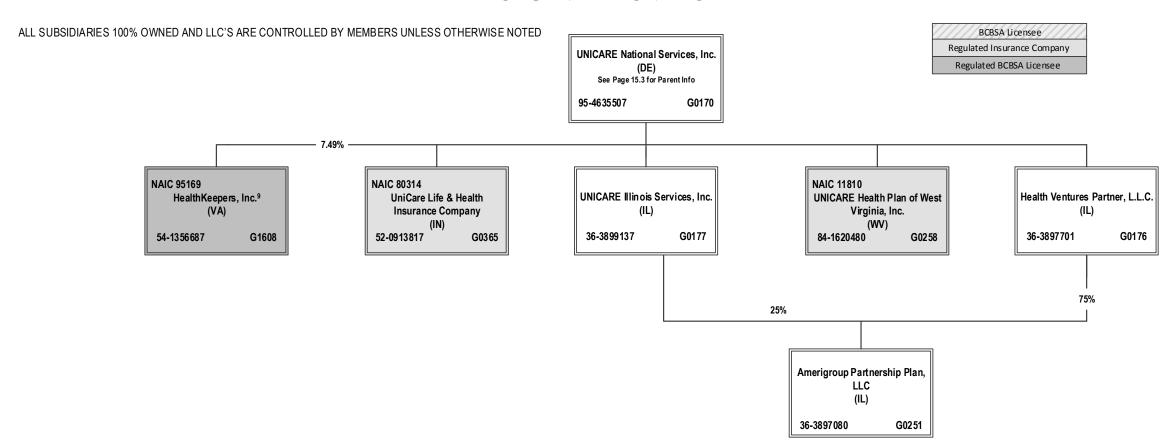






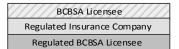
 $^{^7}$ 50% of WCIC is owned by Aurora Health Care, Inc. (non-affiliate). Not consolidated for accounting purposes.

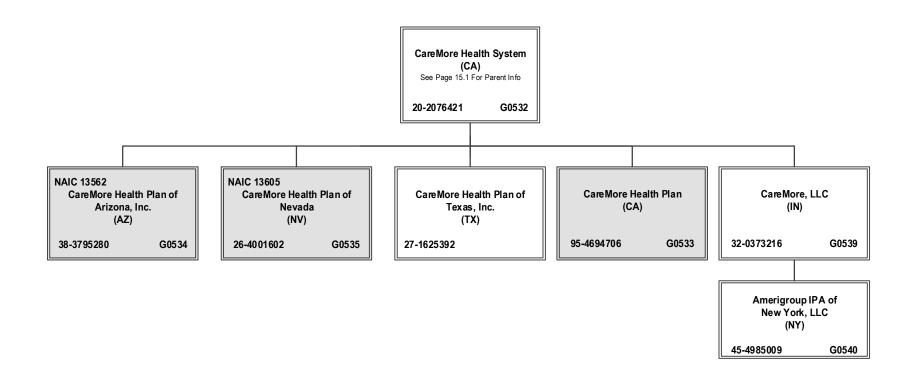
⁸ Anthem Workers' Compensation LLC is owned 75% by Anthem Blue Cross Life and Health Insurance Company and 25% by HealthLink, Inc.

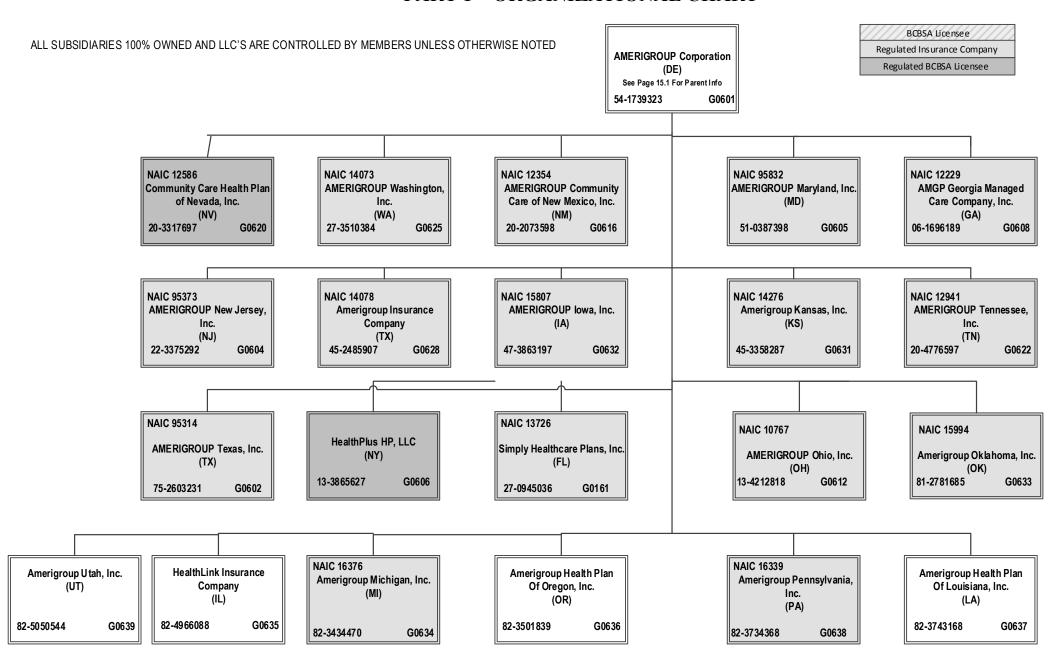


⁹ HealthKeepers, Inc. is owned 92.51% by Anthem Southeast, Inc. and 7.49% by UNICARE National Services, Inc.

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED







SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM															
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	lf			
											of Control	Control			
											(Ownership,	is		ls an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filina	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence.	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
	Anthem. Inc.	Oodc	36-3692630	ПООВ	0001156039	international)	American Imaging Management, Inc.	IL	NIA	Imaging Management Holdings, L.L.C.	Ownership	100.000	Anthem. Inc.	N N	+
1 100	Anthon, me.		. 00 0002000		0001100003		America's 1st Choice of South Carolina, Inc.	'		Imaging management northings, E.E.O.	owner strip		Arthon, mo.		
0671	Anthem. Inc.	15544	46-4729682		0001156039		This road of for one road or obtain our or ma, me.	SC	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem, Inc.		26-0772017		0001156039		America's Health Management Services, Inc	SC	NI A	ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.	N	
							AMERIGROUP Community Care of New Mexico, Inc.			, , , , , , , , , , , , , , , , , , , ,					
0671	Anthem, Inc	12354	20-2073598		0001156039			NM	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		54-1739323		0001156039		AMERIGROUP Corporation	DE	NI A	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		82-1800037		0001156039		AMERIGROUP Delaware, Inc.	DE	NI A	Anthem Partnership Holding Company, LLC	Ownership	100.000	Anthem, Inc.		
	Anthem, Inc.		81-4131800	-	0001156039		Amerigroup District of Columbia, Inc.	DC	IA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	ļ
	Anthem, Inc.		82-3743168		0001156039		Amerigroup Health Plan of Louisiana, Inc.	LA	NI A	AMERIGROUP Corporation	. Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	16376	82-3434470	-	0001156039		Amerigroup Health Plan of Michigan, Inc.	MI	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	ł
0074		40000	00 0704000		0004450000		Amerigroup Health Plan of Pennsylvania, Inc.			WED TODOLD O	0 1:	400 000		.,	
	Anthem, Inc Anthem. Inc.	16339	82-3734368 82-3501839	-	0001156039 0001156039		Amerigroup Health Plan of Oregon, Inc.	PA 0R	NIA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	NN	·
	Anthem. Inc.	14078	45-2485907		0001156039		Amerigroup Insurance Company	TX	NIA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	NN	
	Anthem, Inc.		47-3863197		0001156039		AMERIGROUP Iowa, Inc.	IA	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.		
	Anthem, Inc.		45-4985009		0001156039	***************************************	Amerigroup IPA of New York, LLC	NY	NIA	CareMore. LLC	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		45-3358287		0001156039		Amerigroup Kansas, Inc.	KS	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	1
	Anthem, Inc.		51-0387398		0001156039		AMERIGROUP Maryland, Inc.	MD	IA	AMERIGROUP Corporation	Ownership.	100.000	Anthem. Inc.		1
	Anthem, Inc.		82-3434470		0001156039		Amerigroup Michigan, Inc.	MI	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.		
	Anthem, Inc		81-4626605		0001156039		Amerigroup Mississippi, Inc.	MS	IA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc	95373	22-3375292		0001156039		AMERIGROUP New Jersey, Inc.	NJ	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc		13-4212818		0001156039		AMERIGROUP Ohio, Inc.	OH	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.		
	Anthem, Inc		81-2781685		0001156039		AMERIGROUP Oklahoma, Inc.	OK	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc		36-3897080		0001156039		Amerigroup Partnership Plan, LLC	IL	NI A	Health Ventures Partner, L.L.C.	Ownership	75.000	Anthem, Inc.	N	
	Anthem, Inc.		36-3897080		0001156039		Amerigroup Partnership Plan, LLC	IL	NIA	UNICARE Illinois Services, Inc.	Ownership	25.000	Anthem, Inc.	N	
	Anthem, Inc.	16339	82-3734368 20-4776597		0001156039		Amerigroup Pennsylvania, Inc.	PA TN	IA	AMERIGROUP Corporation	Ownership	25.000	Anthem, Inc.		
	Anthem, IncAnthem, Inc.		75-2603231		0001156039 0001156039		AMERIGROUP Texas, Inc.	- TX	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	NN	
	Anthem, Inc.		27-3510384		0001156039		AMERIGROUP Washington, Inc.	WA	IA	AMERIGROUP Corporation AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
	Anthem. Inc.		82-5050544		0001156039		AMERIGROUP Utah. Inc.	UT	NIA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.		
	Anthem. Inc.		06-1696189		0001156039		AMGP Georgia Managed Care Company, Inc.	GA	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
	mittion, mo.		100 1000 100		0001100000		Anthem Blue Cross Life and Health Insurance			Time trailed Corporation	- owner on p	100.000	7,11110111, 1110.		
0671	Anthem. Inc.	62825	95-4331852		0001156039		Company	CA	IA	WellPoint California Services, Inc.	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem, Inc.		35-1898945		0001156039		Anthem Financial, Inc.	DE	NI A	Associated Group, Inc.	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		61-1237516	.	0001156039		Anthem Health Plans of Kentucky, Inc.	KY	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	Y	0108
	Anthem, Inc.		31-1705652		0001156039		Anthem Health Plans of Maine, Inc.	ME	RE	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc		02-0510530	-	0001156039		Anthem Health Plans of New Hampshire, Inc	NH	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.		
	Anthem, Inc.		54-0357120	. 40003317	. 0001156039		Anthem Health Plans of Virginia, Inc.	VA	IA	Anthem Southeast, Inc.	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc		06-1475928	-	0001156039		Anthem Health Plans, Inc.	CT	IA	ATH Holding Company, LLC	. Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc		61-1459939		0001156039		Anthem Holding Corp.	IN	NI A	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem. Inc.		35-2145715		0001156039	New York Stock Exchange (NYSE)	Anthem. Inc.	IN	UIP				Anthem. Inc.	N	
	Anthem, IncAnthem, Inc.	28207	35-2145/15		0001156039	(INTOE)	Anthem Insurance Companies, Inc.	. IN	UIP IA	Anthem, Inc.	Ownership.	100.000	Anthem. Inc.	Y	0108
	Anthem, Inc.		47-0992859		0001156039		Anthem Insurance Companies, Inc Anthem Kentucky Managed Care Plan, Inc	KY	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	0100
	Anthem. Inc.		20-5876774		0001156039		Anthem Life & Disability Insurance Company	NY	IA	WellPoint Acquisition, LLC	Ownership	100.000	Anthem, Inc.		
1 100	, illo.			1			Transmitted a broadinity modulance company			Rocky Mountain Hospital and Medical	σπιοι σιτιρ		7.11(10.11)		1
0671	Anthem. Inc.	61069	35-0980405	1	0001156039		Anthem Life Insurance Company	IN	IA	Service. Inc.	Ownership	100.000	Anthem. Inc.	N	
	Anthem, Inc.				0001156039		Anthem Merger Sub Corp.	DE	NI A	Anthem, Inc.	Ownership.	100.000	Anthem, Inc.		
0671	Anthem, Inc		81-3974489	.	0001156039		Anthem Partnership Holding Company, LLC	DE	NI A	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		32-0031791	.	0001156039		Anthem Southeast, Inc.	IN	NI A	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc		. 35-2129194	.	0001156039		Anthem UM Services, Inc.	IN	NI A	UNICARE Specialty Services, Inc.	Ownership	100.000	Anthem, Inc	N	
										Anthem Blue Cross Life and Health Insuranc					
0671	Anthem, Inc		. 30-0606541		0001156039		Anthem Workers' Compensation, LLC	IN	NI A	Company	Ownership	75.000	Anthem, Inc.	N	

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

	PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM														
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	_		-		_	·	_				Type	If	1		'-
											of Control	Control		'	,
											(Ownership,	is		ls an	,
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	,
		NAIO					Name of	-	- 1-			- 1		9	,
		NAIC	ID.			if Publicly Traded	Names of	ciliary	to	D: # 0 + # 11	Attorney-in-Fact,	Provide	1.111.	Re-	. '
Group	0 11	Company		Federal	0117	(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	_ '
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	
0671	Anthem, Inc.		30-0606541		0001156039		Anthem Workers' Compensation, LLC	IN	NI A	HealthLink, Inc.	Ownership	25.000	Anthem, Inc.	N	
										American Imaging Management, Inc./HEP AP				· '	'
0671	Anthem, Inc.		80-0531799		0001156039		Applied Pathways, LLC	IL	NI A	Holdings, Inc.	Ownership	100.000	Anthem, Inc.	N	0107
	Anthem, Inc.		95-4640529		0001156039		Arcus Enterprises, Inc.	DE DE	NI A	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		90-1057454 35-1292384		0001156039		Aspire Health, Inc.	. UE	NIA	Nash Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		11-3713086		0001156039		Associated Group, Inc.	IN		Anthem Insurance Companies, Inc.	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		58-0469845		0001156039		ATH Holding Company, LLC		UDP		Ownership	100.000	Anthem. Inc.	N	
0671	Anthem, Inc.	54801	28-0409845		0001156039		Blue Cross and Blue Shield of Georgia, Inc Blue Cross Blue Shield Healthcare Plan of	GA	IA	Cerulean Companies, Inc.	_ uwnersnip	100.000	Anthem, Inc.	N	
0671	Anthem. Inc.	96962	58-1638390		0001156039		Georgia. Inc.	GA	14	Cerulean Companies, Inc.	Ownership	100.000	Anthem. Inc.	N	
	Anthem, Inc.	54003	39-0138065		0001156039		Blue Cross Blue Shield of Wisconsin	GA W I	IA	Crossroads Acquisition Corp.	Ownership	100.000	Anthem, Inc.	Y	
	Anthem, Inc.		95-3760980		0001156039		Blue Cross of California	CA	IA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	N	0101
1 100	AITTHEM, INC.		00800		6600611000		Blue Cross of California Partnership Plan.	UA	IA	merironit carriornia services, Inc.	owner strip	100.000	Anthell, Inc.	N	10101
0671	Anthem. Inc.		20-2994048		0001156039		Inc.	CA	IA	Blue Cross of California	Ownership	100.000	Anthem. Inc.	N	0102
	Anthem. Inc.		95-4694706		0001156039		CareMore Health Plan	CA	IA	CareMore Health System	Ownership	100.000	Anthem. Inc.	N	0103
	Anthem, Inc.	13562	38-3795280		0001156039		CareMore Health Plan of Arizona, Inc.	AZ	ΙΔ	CareMore Health System	Ownership	100.000	Anthem, Inc.	N	0103
	Anthem. Inc.		26-4001602		0001156039		CareMore Health Plan of Nevada	NV	IA	CareMore Health System	Ownership	100.000	Anthem. Inc.	N	
	Anthem. Inc.		27-1625392		0001156039		CareMore Health Plan of Texas, Inc.	TX	NIA	CareMore Health System	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		32-0373216		0001156039		CareMore LLC	IN	NIA	CareMore Health System	Ownership	100.000	Anthem, Inc.	N	
	Anthem. Inc.		20-2076421		0001156039		CareMore Health System	CA	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
	Anthem. Inc.		46-0613946		0001156039		CareMore Services Company, LLC	IN	NIA	The Anthem Companies. Inc.	Ownership	100.000	Anthem Inc	N	
	Anthem. Inc.		58-2217138		0001156039		Cerulean Companies, Inc.	GA	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem. Inc.	N	1
	Anthem. Inc.		39-1413702		0001156039		Claim Management Services. Inc.	WI	NIA	Blue Cross Blue Shield of Wisconsin	Ownership	100.000	Anthem. Inc.	N	
	Anthem. Inc.		82-1853423		0001156039		CCHA. LLC	CO	IA	Anthem Partnership Holding Company, LLC	Ownership	50.000	Anthem. Inc.	N.	0107
	, , , , , , , , , , , , , , , , , , , ,						Community Care Health Plan of Louisiana, Inc			Tartion for the company of the company					
0671	Anthem. Inc.	14064	26-4674149		0001156039		community care round in rail or Esarciana, me	LA	IA	Anthem Partnership Holding Company, LLC	Ownership.	80.000	Anthem. Inc.	N	0109
	Anthem. Inc.	12586	20-3317697		0001156039		Community Care Health Plan of Nevada, Inc	NV	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem. Inc.	N	1
	Anthem, Inc.	10345	31-1440175		0001156039		Community Insurance Company	OH	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N]
							Compcare Health Services Insurance			3 ** 1 ** 7 /					1
0671	Anthem, Inc.	95693	39-1462554		0001156039		Corporation	WI	IA	Blue Cross Blue Shield of Wisconsin	Ownership	100.000	Anthem, Inc.	N]'
0671	Anthem, Inc.		20-0334650		0001156039		Crossroads Acquisition Corp.	DE	NI A	Anthem Holding Corp.	Ownership.	100.000	Anthem, Inc.	N	!
0671	Anthem, Inc.		41-1905556		0001156039		DeCare Analytics, LLC	MN	NI A	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	N	!
0671	Anthem, Inc.		02-0574609		0001156039		DeCare Dental Health International, LLC	MN	NI A	DeCare Dental, LLC	Ownership.	100.000	Anthem, Inc.	N	
	Anthem, Inc.				0001156039		DeCare Dental Insurance Ireland, Ltd	IRL	NI A	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		73-1665525		0001156039		DeCare Dental Networks, LLC	MN	NI A	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		01-0822645	.	0001156039		DeCare Dental, LLC	MN	NI A	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.				0001156039		DeCare Operations Ireland, Limited	IRL	NI A	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		20-0660775	.	0001156039		Delivery Network, LLC	FL	NI A	HealthSun Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		26-2544715		0001156039		Designated Agent Company, Inc.	KY	NI A	Anthem Health Plans of Kentucky, Inc	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		27-2844373	-	0001156039		EasyScripts Cutler Bay, LLC	FL	NI A	HealthSun Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		37–1668303		0001156039		EasyScripts Hialeah, LLC	FL	NI A	HealthSun Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		30-0478573	-	0001156039		EasyScripts LLC	FL	NI A	HealthSun Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		46-0613819		0001156039		EasyScripts Westchester, LLC	FL	NI A	HealthSun Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		13-3934328	-	0001156039		EHC Benefits Agency, Inc.	NY	NI A	WellPoint Holding Corp	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		23-7391136		0001156039		Empire HealthChoice Assurance, Inc.	NY	IA	WellPoint Holding Corp	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.	95433	13-3874803	-	0001156039		Empire HealthChoice HMO, Inc.	NY	IA	Empire HealthChoice Assurance, Inc.	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		26-4286154		0001156039		Federal Government Solutions, LLC	WI	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		41-2128275 20-1378912	-	0001156039		Freedom Health, Inc	FL	IA NIA	ATH Holding Company, LLCATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N N	
	Anthem, Inc.		95-2907752		0001156039		Golden West Health Plan. Inc.	FL	NIA IA	Wall Daint California Carvinsa 1	Ownership	100.000	Anthem, Inc.	N	0104
ו/סע	AITTHEM, INC.		30-230//02	-	6509611000		doluen west mearth rian, Inc.	UA		WellPoint California Services, Inc		100.000	AITTHEM, THE.	N	104
0671	Anthem. Inc.	97217	58-1473042	1	0001156039		Greater Georgia Life Insurance Company	GA	IA	Dide 01055 and blue officerd of deolyla, Inc.	Ownership.	100 000	Anthem Inc	N	1
	Anthem, Inc.		51-0365660		0001156039		Health Core, Inc.	DE	NIA	Arcus Enterprises, Inc.	Ownership	100.000	Anthem, Inc.	N	
	Anthem. Inc.		54-1237939		0001156039		Health Management Corporation	VA	NIA	Southeast Services, Inc.	Ownership	100.000	Anthem. Inc.	N	
UU1	nittion, 1116		505 1201 303		6000011000		Theatth management output at full	- v /\	INI /	וויט וויט טכו אוויס, ווויט וויט וויט טכו אוויס וויט וויט וויט וויט וויט וויט וויט	- I omioi sittp		nittion, IIIC.		

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

				PA	MI I	A - DE I AI	L OF INSURAN	CE I	JOLL	ING COMPANY	SISIEM				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control] ,
											(Ownership,	is		ls an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-] ,
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?] ,
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
0671	Anthem, Inc.		36-3897701		0001156039		Health Ventures Partner, L.L.C.	IL	NIA	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	95169	54-1356687		0001156039		HealthKeepers, Inc.	VA	IA	Anthem Southeast, Inc.	Ownership	92.510	Anthem, Inc.	N	
0671	Anthem, Inc.	95169	54-1356687		0001156039		HealthKeepers, Inc.	VA	IA	UNICARE National Services, Inc.	Ownership	7.490	Anthem, Inc.	N	
0671	Anthem, Inc.		43-1616135		0001156039		HealthLink HMO, Inc.	MO	IA	HealthLink, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		43-1364135		0001156039		HealthLink, Inc.	L	NI A	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671 0671	Anthem, Inc.		82-4966088		0001156039		HealthLink Insurance Company	IL NY	NIA IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	0100
0671	Anthem. Inc.		. 13-3865627 81-4507070		0001156039		HealthPlus HP, LLC HealthSun Blocker Corp. I	DE	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.	NN	0 100
0671	Anthem, Inc.		81-4507070		0001156039		HealthSun Blocker Corp. I	UE DE	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.	NN	
0671	Anthem. Inc.	10122	20-0982649		0001156039		HealthSun Health Plans, Inc.	FL	IA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	1
0671	Anthem. Inc.		20-0660271		0001156039		HealthSun Holdings, LLC	FL	NIA	HealthSun Management, LLC	Ownership	100.000	Anthem, Inc.	N N	
0671	Anthem, Inc.		20-0660168		0001156039		HealthSun Management, LLC	FL	NI A	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.	N]
0671	Anthem, Inc.		46-5250294		0001156039		HealthSun Physicians Network, LLC	FL	NI A	Delivery Network, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		46-3434016		0001156039		HealthSun Physicians Network I, LLC	FL	NI A	HealthSun Physicians Network, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		86-0257201	.	0001156039		Healthy Alliance Life Insurance Company	MO	IA	RightCHOICE Managed Care, Inc	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		47-3953545		0001156039		HEP AP Holdings, Inc.	DE	NI A	Imaging Management Holdings, L.L.C.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-3867547		0001156039		Highland Holdco, Inc.	DE	NI A	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-3487249		0001156039		Highland Acquisition Holdings, LLC	DE	NI A	Highland Intermediate Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-3471305		0001156039		Highland Intermediate Holdings, LLC	DE	NI A	Highland Investor Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-3493196		0001156039		Highland Investor Holdings, LLC	DE	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem. Inc.	95473	84-1017384		0001156039		HMO Colorado, Inc.	CO	1.4	Rocky Mountain Hospital and Medical Service, Inc.	Ownership	100.000	Anthem. Inc.	Ү	0108
0671	Anthem, Inc.	95358	37-1216698		0001156039		HMO Missouri. Inc.	MO	IA	RightCHOICE Managed Care, Inc.	Owner Strip	100.000	Anthem. Inc.	N	0100
0671	Anthem. Inc.				0001156039		Human Resource Associates, LLC	FL	NIA	HealthSun Holdings, LLC	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem, Inc.		75-2619605		0001156039		Imaging Management Holdings, L.L.C.	DE	NI A	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		82-3062245		0001156039		IngenioRX, Inc.	IN	NI A	Newco Holdings, Inc.	Ownership	100.000	Anthem, Inc.]
0671	Anthem, Inc.		98-1397080		0001156039		Legato Health Technologies LLC	IN	NI A	Legato Holdings I, Inc.	Ownership	100.000	Anthem, Inc.	N	0110
0671	Anthem, Inc.		82-3030791		0001156039		Legato Holdings I, Inc.	IN	NI A	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		82-3031178		0001156039		Legato Holdings II, Inc.	IN	NI A	Legato Holdings I, Inc	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		02-0581429		0001156039		Living Complete Technologies, Inc.	MD	NI A	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0074		05507								Anthem Health Plans of New Hampshire, Inc.		400.000] ,
0671	Anthem, Inc.		02-0494919		0001156039		Matthew Thornton Health Plan, Inc Medical Mall of Florida, LLC	NH	NIA	HealthSun Holdings, LLC	Ownership	100.000	Anthem, Inc.	NN	
0671	Anthem, Inc.		46-5262131		0001156039		Memphis Supportive Care Partnership, LLC	FL TN	NIA	Nash Holding Company, LLC	Ownership	100.000	Anthem, Inc.	NN	
0071	Airtheil, Illo.		40-3202131		0001130033		weilpin's supportive care raithership, LLC		NI //	Compcare Health Services Insurance	Owner Sirrp		Airtheil, Ilic.		
0671	Anthem. Inc.		39-2013971	1	0001156039		Meridian Resource Company, LLC	WI	NIA	Corporation	Ownership	100.000	Anthem, Inc.	N.	
0671	Anthem. Inc.		83-0892028		0001156039		Nash Holding Company, LLC	DE	NI A	ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.		0111
0671	Anthem, Inc.		35-1840597		0001156039		National Government Services, Inc.	IN	NI A	Federal Government Solutions, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		46-1595582		0001156039		National Telehealth Network, LLC	DE	NI A	Sellcore, Inc.	Ownership	50.000	Anthem, Inc.	N	0105
0671	Anthem, Inc.		04-2919509	.	0001156039		New England Research Institute, Inc.	MA	NI A	Health Core, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		82-3027094		0001156039		Newco Holdings, Inc.	IN	NI A	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-5476630	-	0001156039		NGS Federal, LLC	IN	NI A	Federal Government Solutions, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	12259	20-1336412		0001156039		Optimum Healthcare, Inc.	FL	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		95-4249368	-	0001156039		Park Square Holdings, Inc.	CA	NIA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671 0671	Anthem, Inc.		95-4386221		0001156039		Park Square I, Inc.	CA	NIA NIA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	NN	
0671	Anthem, Inc.		27-1991772	-	0001156039		Park Square II, Inc.		NIA	WellPoint California Services, Inc Pasteur Medical Holdings, LLC	Ownership	100.000	Anthem, Inc.	NN	
0671	Anthem, Inc.		20-2749389	1	0001156039		Pasteur Medical Center, LLC	DE	NIA	HealthSun Holdings, LLC	Ownership	100.000	Anthem. Inc.		
0671	Anthem, Inc.		27-1366915	1	0001156039		Pasteur Medical Cutler Bay, LLC	FL	NIA	Pasteur Medical Holdings, LLC	Owner Strip	100.000	Anthem, Inc.	N	1
0671	Anthem. Inc.		20-0610128		0001156039		Pasteur Medical Group, LLC	FL	NIA	Pasteur Medical Holdings, LLC	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem, Inc.		37-1668303		0001156039		Pasteur Medical Hialeah Gardens, LLC	FL	NI A	Pasteur Medical Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		45-1616220	.	0001156039		Pasteur Medical Holdings, LLC	FL	NI A	HealthSun Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		47-3464152		0001156039		Pasteur Medical Kendall, LLC	FL	NI A	Pasteur Medical Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		27-2810478		0001156039		Pasteur Medical Management, LLC	FL	NI A	Pasteur Medical Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1		2	3	4	5	6 7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control			
											(Ownership,	is		ls an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
			NAIC			if Publicly Traded	Names of	_			Attorney-in-Fact.	Provide		Re-	
_				ın				ciliary	to	D: " O . " II			1 11111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		_
Group			Company	. ID	Federal	(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code		oup Name	Code	Number		CIK International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
0671	Anthem, Inc			33-1217936	00011		Pasteur Medical Miami Gardens, LLC	FL	NI A	Pasteur Medical Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc			27-2651017		56039	Pasteur Medical North Miami Beach, LLC	FL	NI A	Pasteur Medical Holdings, LLC	Ownership	100.000	Anthem, Inc	N	
0671	Anthem, Inc			26-0813665	00011		Pasteur Medical Partners, LLC	FL	NI A	HealthSun Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc			27-2844265		56039	Pasteur Pharmacy II, LLC	FL	NI A	HealthSun Holdings, LLC	Ownership	100.000	Anthem, Inc	N	
0671	Anthem, Inc			45-4493353		56039	Pasteur Pharmacy IV, LLC	FL	NI A	HealthSun Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc			56-2396739		56039	Resolution Health, Inc.	DE	NI A	Anthem Southeast, Inc.	Ownership	100.000	Anthem, Inc	N	
0671	Anthem, Inc			47-0851593		56039	RightCHOICE Managed Care, Inc.	DE	NI A	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	
							Rocky Mountain Hospital and Medical Service								
	Anthem, Inc		11011	84-0747736	00011		Inc	CO	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
	. Anthem, Inc			20-0473316		56039	SellCore, Inc.	DE	NI A	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc		13726	27-0945036	00011		Simply Healthcare Plans, Inc.	FL	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	. Anthem, Inc			55-0712302		56039	Southeast Services, Inc.	VA	NI A	Anthem Southeast, Inc.	Ownership	100.000	Anthem, Inc.	N	
D671	Anthem, Inc			45-4071004			State Sponsored DM Services, Inc	IN	NI A	UNICARE Specialty Services, Inc	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc			35-1835818	00011	56039	The Anthem Companies, Inc.	IN	NI A	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc			45-5443372	00011		The Anthem Companies of California, Inc	CA	NI A	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc				00011	56039	The Medical City, LLC	FL	NI A	HealthSun Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc			43-1967924			TrustSolutions, LLC	WI	NI A	Federal Government Solutions, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc		11810	84-1620480		56039	UNICARE Health Plan of West Virginia, Inc.	WV	IA	UNICARE National Services, Inc.	Ownership.	100.000	Anthem, Inc.	N	
0671	Anthem, Inc			36-3899137			UNICARE Illinois Services, Inc.	IL	NI A	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc		80314	52-0913817		56039	UNICARE Life & Health Insurance Company	IN	IA	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc			95-4635507		56039	UNICARE National Services, Inc.	DE	NI A	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc			82-3300542		56039	UNICARE Specialty Services, Inc.	DE	NI A	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc			20-0660563		56039	Valus, Inc.	IN	NI A	IngenioRX, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc			20-0660644		56039	WellMax Health Medical Centers, LLC	FL	NI A	Delivery Network, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc			36-4014617		56039	WellMax Health Physicians Network, LLC	FL	NI A	Delivery Network, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc			20-4405193		56039	WellPoint Acquisition, LLC	IN	NI A	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc			20-2156380		56039	WellPoint Behavioral Health, Inc.	DE	NI A	UNICARE Specialty Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc			95-4640531	00011	56039	WellPoint California Services, Inc.	DE	NI A	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc			95-4657170	00011	56039	WellPoint Dental Services, Inc.	DE	NI A	UNICARE Specialty Services, Inc.	Ownership	100.000	Anthem, Inc.	lN	
0671	Anthem, Inc.			81-2874917	00011	56039	WellPoint Health Solutions, Inc.	DE	NIA	Federal Government Solutions, LLC	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.			20-3620996	00011		WellPoint Holding Corp	DE	NI A	Anthem. Inc.	Ownership	_100.000	Anthem. Inc.	N	
	,						WellPoint Information Technology Services,			,			, , , , , , , , , , , , , , , , , , , ,		
0671	Anthem. Inc.			45-2736438	00011	56039	Inc.	CA	NI A	Blue Cross of California	Ownership	100.000	Anthem. Inc.	N	
	Anthem, Inc.			47-2546820	00011		WellPoint Insurance Services, Inc.	HI	NIA	Anthem. Inc.	Ownership	100.000	Anthem. Inc.	N N	
0671	Anthem. Inc.			47-2546820	00011		WellPoint Military Care Corporation	IN	NI A	Federal Government Solutions, LLC	Ownership	_100.000	Anthem. Inc.	N	
0671	Anthem. Inc.		15929	47-5569628	00011		Wisconsin Collaborative Insurance Company	WI	IA	Crossroads Acquisition Corp.	Ownership	50.000	Anthem. Inc.	N	0107
0671	Anthem. Inc.			98-0552141	00011		WPMI (Shanghai) Enterprise Service Co. Ltd.		NIA	WPMI. LLC	Ownership	_100.000	Anthem. Inc.	N	1
0671	Anthem. Inc.			20-8672847	00011		WPMI. LLC	DE	NIA	ATH Holding Company, LLC	Ownership	69.910	Anthem. Inc.	N	0106
ו/סע	. Arithem, Inc			20-80/284/			mrmi, LLC	UE	NI A	AIR RUIGING COMPANY, LLC	Uwrier Srifp	01 8.80	- AFILTIEIII, INC.	NL	

Asterisk	Explanation
0100	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the New York State Department of Health.
0101	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care.
0102	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care.
0103	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care.
0104	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care.
0105	. 50% owned by unaffiliated investors
0106	30.09% owned by unaffiliated investors
0107	50% owned by an unaffiliated investor
0108	Received exemption from domestic regulator
0109	20% owned by an unaffiliated investor

Asterisk	Explanation
0110	Legato Health Technologies LLP is a Limited Liability Partnership formed under the laws of India, and is 99% owned by Legato Holdings I, Inc. an Indiana corporation, and 1% owned by Legato Holdings II, LLC, an Indiana Limited Liability company.
0111	ATH Holding Company, LLC holds an 89.67% ownership interest with certain former holders of Aspire Health, Inc. collectively holding the remainder of the shares

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

		Response
1.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	N0
	Explanation:	
1.		
1.	Bar Code: Medicare Part D Coverage Supplement [Document Identifier 365]	

OVERFLOW PAGE FOR WRITE-INS

Addition	al Write-ins for Liabilities Line 23							
			Current Period					
		1	2	3	4			
		Covered	Uncovered	Total	Total			
2304.	Performance Guarantee Liability	512,575		512,575	507,026			
2305.	Other Liabilities	510,943		510,943	2,822,735			
2306.	Blue Card Liabilties	154,652		154,652	670,707			
2397.	Summary of remaining write-ins for Line 23 from overflow page	1, 178, 170	0	1, 178, 170	4,000,468			

SCHEDULE A - VERIFICATION

Real Estate

		1	2
		Year to Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	72,500	72,500
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Current year change in encumbrances		0
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted carrying value		0
7.	Deduct current year's other than temporary impairment recognized		0
8.	Deduct current year's depreciation		0
9.	Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)	72,500	72,500
10.	Deduct total nonadmitted amounts		0
11.	Statement value at end of current period (Line 9 minus Line 10)	72,500	72,500

SCHEDULE B - VERIFICATION

Mortgage Loans

	wortgage Loans		
		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year	-	
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage in the state of the land ammitment the state of the		
9.	Total foreign exchange change in book value/recalled in the length cluding and use the state of		
10.	Deduct current year's other than temporary impalent red zed zed zed zed zed zed zed zed zed z		
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	Other Long-Term Invested Assets		
		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	137,479	137,985
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		0
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)	(17,479)	(506)
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		0
10.	Deduct current year's other than temporary impairment recognized	120,000	0
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	137,479
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)	0	137,479

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	217,739,541	190, 140, 929
2.	Cost of bonds and stocks acquired	90,501,111	137 , 276 , 855
3.	Accrual of discount	446,681	467,095
4.	Unrealized valuation increase (decrease)	(35,001)	(264,608)
5.	Total gain (loss) on disposals		1,437,606
6.	Deduct consideration for bonds and stocks disposed of	38,329,689	110,436,759
7.	Deduct amortization of premium	593,345	881,577
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	270,607,133	217,739,541
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)	270,607,133	217,739,541

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

Duilli	g the Current Quarter for	2	3	4	5	6	7	8
	Book/Adjusted		5		Book/Adjusted	Book/Adjusted	Book/Adjusted	Book/Adjusted
	Carrying Value Beginning	Acquisitions During	Dispositions During	Non-Trading Activity During	Carrying Value End of	Carrying Value End of	Carrying Value End of	Carrying Value December 31
NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
· ·								
BONDS								
1. NAIC 1 (a)	235,459,955	23,848,582	20,279,798	1,990,155	241,674,464	235,459,955	241,018,894	186,301,139
2. NAIC 2 (a)	37,429,316	1,000,000	18,786	(2,041,989)	28,562,995	37,429,316	36,368,541	28,626,171
3. NAIC 3 (a)	0				6,105,457	0	0	3,111,600
4. NAIC 4 (a)	0				0	0	0	
5. NAIC 5 (a)	0				0	0	0	
6. NAIC 6 (a)					0	0	0	
7 7 100	272.889.271	24,848,582	20.298.584	(51.834)	276,342,916	272,889,271	277,387,435	218,038,910
7. Total Bonds	212,000,211	24,040,002	20,200,004	(31,004)	270,042,010	272,003,271	211,001,400	210,000,010
PREFERRED STOCK								
8. NAIC 1	0				0	0	0	0
9. NAIC 2	0				0	0	0	0
10. NAIC 3	0				0	0	0	0
11. NAIC 4					0	0	0	0
12. NAIC 5					n	٥	٥	
	0							0
13. NAIC 6		_	_	_	0	- 0	- 0	-
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	272.889.271	24,848,582	20,298,584	(51,834)	276,342,916	272,889,271	277,387,435	218,038,910

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$ _______ 0 ; NAIC 2 \$ ______ 0 ; NAIC 3 \$ ______ 0 NAIC 4 \$ ______ 0 ; NAIC 5 \$ ______ 0 ; NAIC 6 \$ ______ 0

SCHEDULE DA - PART 1

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year-to-Date	5 Paid for Accrued Interest Year-to-Date
9199999 Totals	4,291,303	XXX	4,286,111	0	4,599

SCHEDULE DA - VERIFICATION

Short-Term Investments

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	870,724
2.	Cost of short-term investments acquired	4,982,823	323,556,965
3.	Accrual of discount	7,464	5,031
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals	8	(2,305)
6.	Deduct consideration received on disposals	698,992	324,430,415
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	4,291,303	0
11.	Deduct total nonadmitted amounts		0
12.	Statement value at end of current period (Line 10 minus Line 11)	4,291,303	0

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards NONE

Schedule DB - Part B - Verification - Futures Contracts ${f N}$ ${f O}$ ${f N}$ ${f E}$

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open NONE

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open NONE

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of Derivatives

NONE

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	(Odoti Equivalento)	1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	16,841,203	20,587
2.	Cost of cash equivalents acquired	983,489,648	280,704,813
3.	Accrual of discount	51,256	22,538
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals	(299)	375
6.	Deduct consideration received on disposals	997,892,809	263,907,110
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	2,488,999	16,841,203
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	2,488,999	16,841,203

Schedule A - Part 2 - Real Estate Acquired and Additions Made **NONE**

Schedule A - Part 3 - Real Estate Disposed **NONE**

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made **NONE**

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

NONE

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid $\bf N$ $\bf O$ $\bf N$ $\bf E$

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1			OHOW 7th Lo	ong-reini bonds and Stock Acquired buring the ourient Quarter					
1	2	3	4	5	6	7	8	9	10 NAIC Desig- nation or
					Number of			Paid for Accrued	Market
CUSIP			Date		Shares of			Interest and	Indicator
Identification	Description	Faraian		Name of Vendor		Actual Cost	Par Value	Dividends	(a)
		Foreign	Acquired	Name of Vendor	Stock	Actual Cost			
	US TREASURY N/B 2.625% 06/15/21		07/05/2018 H 08/02/2018 B	15BU		2,498,145 4,180,476	2,500,000 4,200,000	3,765	
	US_TREASURY_SEC _ 2.750% 07/31/23		08/02/2018 B	Bony/Barclays Capital Inc		, ,	, ,		
	otal - Bonds - U.S. Governments					6,678,621	6,700,000	4,707	100
09681L-AH-3 98886M-BA-1	BOC AVIATION LTD SERIES 144A 3.499% 09/26/23	D	09/19/2018 C 09/18/2018 N	Citigroup Global Markets		3,400,000	3,400,000	0	1FE
	ZAIS CLO 1 LTD SERIES 2014-1A CLASS A1AR 144A 3.489% 04/15/28	υ	09/ 18/2018 N	IONURA SEC INTERNATIONAL INC		2,600,000	2,600,000	U	IFE
	otal - Bonds - Industrial and Miscellaneous (Unaffiliated)					6,000,000	6,000,000	0	XXX
	STATE STREET CORP SERIES H 5.625% Perpet.		09/20/2018 G	Goldman Sachs & Co		1,000,000	1,000,000	0	2FE
4899999. Subto	otal - Bonds - Hybrid Securities					1,000,000	1,000,000	0	XXX
8399997. Total	- Bonds - Part 3					13,678,621	13,700,000	4,707	XXX
8399998. Total	- Bonds - Part 5					XXX	XXX	XXX	XXX
8399999. Total	- Bonds					13,678,621	13,700,000	4,707	XXX
8999997. Total	- Preferred Stocks - Part 3					0	XXX	0	XXX
8999998. Total	- Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
8999999. Total	- Preferred Stocks					0	XXX	0	XXX
9799997. Total	- Common Stocks - Part 3					0	XXX	0	XXX
9799998. Total	- Common Stocks - Part 5					XXX	XXX	XXX	XXX
	- Common Stocks					0	XXX	0	XXX
9899999. Total	- Preferred and Common Stocks					0	XXX	0	XXX
								·····	
							2007		
9999999 - Tota	llS					13,678,621	XXX	4,707	XXX

⁽a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold. Redeemed or Otherwise Disposed of During the Current Quarter

	Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter																				
1	2	3	4	5	6	7	8	9	10	Ch	ange In Boo	ok/Adjusted	Carrying Va	lue	16	17	18	19	20	21	22
										11	12	13	14	15							
													Total	Total							NAIC
												Current	Change in	Foreign							Desig-
												Year's	Book/	Exchange	Book/				Bond		nation
									Prior Year		Current	Other Than		Change in	Adjusted	Foreign			Interest/	Stated	or
										Unrealized		Temporary	,	Book	Carrying	Exchange	Realized		Stock	Con-	Market
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairment		/Adjusted	Value at	Gain	Gain	Total Gain	Dividends	tractual	In-
Ident-		For-	Disposal	Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -		Disposal	(Loss) on	(Loss) on	(Loss) on	Received	Maturity	dicator
ification	Description	eign	Disposai	of Purchaser	Stock	eration	Par Value	Cost	Value		,			Carrying		Disposal	Disposal		DuringYear	Date	(a)
	US TREASURY N/B 2.625% 06/15/21	eign		Bank of America	Slock	2.490.723	2.500.000	2.498.145	value	(Decrease)	Accretion 38	nized	13)	Value	2.498.182	Disposai	Disposai (7,460)			06/15/2021	(a)
	Subtotal - Bonds - U.S. Governments		08/02/2018	bank of America		2,490,723	2.500,000	2,498,145		0	38	0	38	0	2,498,182	0	(7,460)	(7,460)	8,786	XXX	XXX
	FHLMC GOLD POOL G08784 3.500% 10/01/47		09/01/2018	Dd	1	2,490,723	2,500,000	2,498,145	147.237	0	(4.009)	0	(4,009)	0	2,498,182	0	(7,400)	(7,460)	3,362	10/01/2047	^^^
	FHLMC GOLD POOL G08784 3.500% 10/01/47		09/01/2018			35,091		36,148	36,140		(4,009)	0	(1,049)		35,091	0				10/01/2047	1
	FHLMC GOLD POOL G08789 4.000% 11/01/47		09/01/2018			169,755	169.755	178.839	178.774	0	(9.020)	0	(9.020)	0	169.755	0	0	0	4.544	11/01/2047	1
	FNMA POOL AS8966 4.000% 03/01/47		.09/01/2018			259,084	259,084	265,045	0	0	(5,961)	0	(5,961)	0	259.084	0	0	0	4.388	.03/01/2047	1
	FNMA POOL BE3702 4.000% 06/01/47		09/01/2018			215,791	215,791	220,756	0	0	(4,965)	0	(4,965)	0	215,791	0	0	0	3,500	06/01/2047	1
	FNMA POOL BH5387 4.000% 09/01/47			Paydown		387,610	387,610	396,528	0	0	(8,918)	0	(8,918)	0	387,610	0	0	0	6,791	09/01/2047	1
	FNMA POOL BH6660 4.000% 08/01/47			Paydown		<u>4</u> 85,876	485,876	497,055	0	0	(11,179)	0	(11, 179)	0	485,876	0	0	0	8,624	08/01/2047	1
	FNMA POOL CA0183 4.000% 08/01/47			Paydown		365, 109	365, 109	373,509	Ω	0	(8,400)	0	(8,400)	0	365 , 109	0	0	0	5,900	08/01/2047	1
	FNMA POOL MA3238 3.500% 01/01/48		09/01/2018	Paydown		105,842	105,842	107,640	0	0	(1,798)	0	(1,798)	0	105,842	0	0	0	2, 173	01/01/2048	1
	ubtotal - Bonds - U.S. Special Reven	ues		,		2,167,386	2,167,386	2,222,776	362, 151	0	(55, 299)	0	(55, 299)	0	2,167,386	0	0	0	40,100	XXX	XXX
	BEAR STEARNS ALT A TRUST SERIES 2005-5 CLASS		00 (04 (0040	D 4		400 744	122.007	440.000	440 444		40.000		40.000		400 744				3.058	07 (05 (0005	4511
	24A1		09/01/2018	Paydown		123,744	122,007	113,009	113, 141	0	10,603	0	10,603	0	123,744	0	0		3,058	07/25/2035	IFM
	CLASS 6A6 6.000% 12/25/35		09/01/2018	Pavdown		18.786	18.786	16,578	15,319	1.303	2.164	0	3.467	0	18.786	0	0	0	747	12/25/2035	2FM
	GSAA HOME EQUITY TRUST SERIES 2007-4 CLASS A2		03/01/2010	rayuuwii							2, 104									12/23/2033	21 W
	2.416% 03/25/37		09/25/2018	Pavdown		155.586	155.586	87.583	88.564	0	67.022	0	67.022	0	155.586	0	0	0	2.017	03/25/2037	1FM
	INDYMAC INDX MORTGAGE LOAN TRU SERIES 2006-			.,				, ,			,		,								
	AR39 CLASS A1 2.396% 02/25/37		09/25/2018	Paydown		165, 150	180,451	170,526	170,464	0	(5, 313)	0	(5,313)	0	165 , 150	0	0	0	2,366	02/25/2037	1FM
	ATLAS SENIOR LOAN FUND LTD SERIES 2013-2A																				
	CLASS A1RR 144A 2.994% 02/17/26	D	08/15/2018	Paydown		86,305	86,307	86,307	0	0	0	0	0	0	86,307	0	0	0	667	02/17/2026	1FE
	MP CLO VII LTD SERIES 2015-1A CLASS A1R 144A 3.173% 04/18/27	n	09/12/2018	Paudaun		4.000.000	4.000.000	4.000.000	4.000.000	0	0	,		0	4.000.000		,	0	83.316	04/18/2027	1FE
	ubtotal - Bonds - Industrial and Misce	llaneo				4.549.571	4.563.137	4,474,003	4.387.488	1.303	74.476	0	75.779	Δ	4.549.573	0	Λ	0	92.171	XXX	XXX
	otal - Bonds - Part 4	maneo	us (Oriaillii	aleuj		9.207.680	9,230,523	9, 194, 924	4,749,639	1,303	19.215	0	20.518	0	9.215.141	0	(7.460)	(7.460)	141.057	XXX	XXX
	otal - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal - Bonds					9.207.680	9,230,523	9. 194. 924	4.749.639	1,303	19.215	^^^	20.518	^^^	9.215.141	^^^	(7.460)	(7,460)	141.057	XXX	XXX
	otal - Preferred Stocks - Part 4					9,207,680	9,230,523 XXX	9, 194, 924	4,749,639	1,303	19,215	0	20,518	0	9,215,141	0	(7,460)	(7,460)	141,057	XXX	XXX
						XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX		XXX		XXX
	otal - Preferred Stocks - Part 5 otal - Preferred Stocks					***	XXX	+				XXX	XXX				***	XXX		XXX	
						0		0	0	0	0	0	0	ŭ	0	0	0	0	0		XXX
	otal - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0		0	0	0	0	0	XXX	XXX
	otal - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	otal - Preferred and Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9999999 - 7	Totals					9,207,680	XXX	9, 194, 924	4,749,639	1,303	19,215	0	20,518	0	9,215,141	0	(7,460)	(7,460)	141,057	XXX	XXX

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open **NONE**

Schedule DB - Part B - Section 1 - Futures Contracts Open NONE

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made **NONE**

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To **NONE**

SCHEDULE DL - PART 1 SECURITIES LENDING COLLATERAL ASSETS Reinvested Collateral Assets Owned Current Statement Date collateral assets reported in aggregate on Line 10 of the Assets page and not included on Schedules A, B, BA, D, DB and E)

1	2	3	Assets page and 4	5	6	7
CUSIP			NAIC Designation/	- · · · ·	Book/Adjusted	
dentification	Description I - U.S. Government Bonds	Code	Market Indicator	Fair Value	Carrying Value	Maturity Dat XXX
	I - All Other Government Bonds			0	0	XXX
	I - U.S. States, Territories and Possessions Bonds			0	0	XXX
	I - U.S. Political Subdivisions Bonds			0	0	XXX
	I - U.S. Special Revenues Bonds			0	0	XXX
1/G-Q2-/71E-NM-7	BANK OF NOVA SCOTIA HOUSTON		1	231,102 129,340	230,881 129,294	03/20/2019 04/23/2019
14M-ER-4	TORONTO DOMINION NY			184,705	184,705	09/17/2019
89R-R2-6	WELLS FARGO BANK SAN FRANCISCO N.A		1	461,816	461,763	07/11/2019 _ XXX
	otal - Borlos - Industrial and Miscellaneous (Unaffiliated) - Issue I - Industrial and Miscellaneous (Unaffiliated) Bonds	er Obligations		1,006,963 1,006,963	1,006,643 1,006,643	XXX
	I - Hybrid Securities			0	1,000,040	XXX
	I - Parent, Subsidiaries and Affiliates Bonds			0	0	XXX
	otal - SVO Identified Funds			0	0	XXX
	I - Issuer Obligations			1,006,963	1,006,643	XXX
	I - Residential Mortgage-Backed Securities			0	0	XXX
	I - Commercial Mortgage-Backed Securities I - Other Loan-Backed and Structured Securities			0	0	XXX
	I - SVO Identified Funds			0	0	XXX
699999. Tota				1,006,963	1,006,643	XXX
099999. Tota	I - Preferred Stocks			0	0	XXX
	I - Common Stocks			0	0	XXX
	I - Preferred and Common Stocks			0 208.370	0	XXX
000-00-0 000-00-0	CIC LONDON				206,061 923,526	10/25/2018
000-00-0	MORGAN STANLEY				923,526	11/08/2018
000-00-0 000-00-0	UNITED OF OMAHA LIFE INSURANCE			92,353	92,353 277,058	10/29/2018
000-00-0	AUSTRALIA NEW ZEALAND SINGAPORE			92,353	92,353	11/13/2018
71X-GY-1	BANCO DEL ESTADO DE CHILE NY				184,705	03/20/2019 .
53P-P7-6 19R-ML-6	BANK OF AMERICA CHARLOTTE BANK OF CHINA, HONG KONG BRANCH				184,705 64,235	01/15/201912/20/2018 .
20B-L2-1	BANK OF CHINA (HONG KONG) LIMITED			276,448	275,300	11/02/2018
42T-HN-9 42T-HR-0	BARCLAYS NEW YORK				129, 294 55, 412	02/01/201902/04/2019 .
84B-5H-3	RABOBANK NEW YORK			277,061	277,058	10/01/2018 .
684B-5J-9 636U-SP-6	RABOBANK NEW YORK				147,764	04/05/2019 .
88K-EP-0	ING (US) Funding LLC			184,800	184,705	02/08/2019 .
188K-GA-1	ING (US) Funding LLCIND AND COM BK OF CHINA LTD, NY BR			277,086	277,058	05/10/2019 .
80D-TH-7 80D-UH-5	IND AND COM BK OF CHINA LID, NY BR				184,705 36,941	12/24/2018 .
379W-DA-1	MUFG Bank Ltd, New York Branch				369,410	10/29/2018 .
700A-S3-9 700A-WX-8	MIZUHO BANK LIMITED NEW YORK MIZUHO BANK LIMITED NEW YORK				92,353 286,293	03/05/2019 _
373N-UN-9	NATIXIS NY			92,402	92,353	03/05/2019 .
590A-UR-5 124M-LS-7	NORDEA BK AB NY				184,705 91,145	04/05/2019 .
69Y-D7-8	SOCIETE GENERALE NEW YORK			184,702	184,705	10/02/2018
69Y-XP-6 20M-L8-4	SOCIETE GENERALE NEW YORK STARBIRD FUNDING CORP				92,369 55,096	12/03/2018 .
64F-AN-3	SUMITOMO MITSUI TRUST BANK LTD,NY			277,060	277,058	10/11/2018
64F-DB-6 65B-MC-2	SUMITOMO MITSUI TRUST BANK LTD, NY				184,705 184,705	10/15/201803/05/2019 .
оов-мо-2 58J-QM-4	SVENSKA NY				184,705	01/03/2019 .
76J-DQ-6	UNION BANK OF SWITZERLAND CP			277,313	277,058	02/01/2019 .
2C4-YT-2 2C4-ZC-8	WESTPAC BKG CORP			92,404 184,705	92,353 184,705	05/24/201908/08/2019 .
999999. Tota	I - Short-Term Invested Assets (Schedule DA type)		,	7,632,853	7,627,555	XXX
000-00-0	NATIXIS FINANCIAL PRODUCTS LLC				120,058	10/01/2018 .
000-00-0 000-00-0	ING FINANCIAL MARKETS LLC					10/01/2018 _
000-00-0	CANADIAN IMPERIAL BANK G.C.				36,941	10/01/2018 .
000-00-0 000-00-0	SHINKIN CENTRAL BANK				184,705 184,705	10/26/2018 .
000-00-0	DEUTSCHE BANK SECURITIES INC.			114,683	114,683	10/01/2018 .
000-00-0	NOMURA SECURITIES		ļ	92,353	92,353	10/01/2018 .
19R-KK-0 06B-5U-8	BANK OF CHINA, HONG KONG BRANCH			110,68192,351	110 , 140 92 , 353	10/19/2018 .
06B-6D-5	THE CHIBA BANK LTD NEW YORK BRANCH			277,050	277,053	11/09/2018 _
00L-T3-5	LANDESBANK BADEN WUERTTEMBERG, NY I - Cash Equivalents (Schedule E Part 2 type)		<u> </u>	92,350 2,137,050	92,353 2,136,517	10/02/2018 _ XXX
aaaaa I a+a	r - Qaar Euriyalenia (Ocheurie E Fall & IVDE)				/ Lan 51/	^ ^ ^

2222	99 - 10tais			10,770,000	10,770,713	^^^
enera	al Interrogatories:					
1.	Total activity for the year	Fair Value \$5, 140,596	Book/Adjusted Carrying Value \$	5, 134, 445		
2.	Average balance for the year	Fair Value \$	Book/Adjusted Carrying Value \$	5,052,564		
3.	Reinvested securities lending c	ollateral assets book/adjusted carrying	value included in this schedule by	NAIC designation:		
	NAIC 1 \$ 10 656 032 NA	AIC 2 \$ 114 683 NAIC 3 \$	n NAIC 4 \$	n NAIC 5 \$	n NAIC 6 9	0

SCHEDULE DL - PART 2 SECURITIES LENDING COLLATERAL ASSETS Reinvested Collateral Assets Owned Current Statement Date Resident included on School upo A. P. P.A. D. D.P. and E. and not reported in aggregate on

(Securiti	es lending collateral assets included on Schedules A, B, BA, I	ט, טא ו	and E and not re	eported in aggregate	on Line 10 of the As	sets page)
1	2	ω	4	5	6	7
			NAIC		!	l
CUSIP			Designation/		Book/Adjusted	l
Identification	Description	Code	Market Indicator	Fair Value	Carrying Value	Maturity Date
- Idontinoation	2000101011		market mareater		Garrying Failus	matanty Bate
			·····			<u> </u>
					<u> </u>	l
						
					<u> </u>	l
						
9999999 - Tota	als					XXX

General	int	erro	gai	O	ries:

Total activity for the year
 Average balance for the year

Fair Value \$	 Book/Adjusted Carrying Value \$	
Fair Value \$	 Book/Adjusted Carrying Value \$	

SCHEDULE E - PART 1 - CASH Month End Depository Balances

				End Depository					
1	1	2	3	4	5		lance at End of Ead uring Current Quart		9
				Amount of	Amount of	6	7	8	1
				Interest Received					
_			Rate of		at Current				*
Depo	sitory	Code	Interest	Quarter	Statement Date	First Month	Second Month	Third Month	*
	101 S. Tryon Street, 19th								
	Floor, Charlotte, NC 28255								
Bank of America						(4,539,491)	(6,155,958)	(3,741,137)	XXX
	500 Ross Street, Suite								
Bank of New York Mellon (or	154-1320, Pittsburgh, PA								
	15262					(73,334)	(88,794)	(152,759)	.xxx.
,	One Penn's Way, New Castle,					, , ,	, , ,	, , ,	
Citi bank	DE 19720					101 678	927 822	105 798	XXX
	4 New York Plaza. 13th								
JP Morgan Chase	. Floor, New York, NY 10004					879.037	688.483	774.357	.xxx.
0199998. Deposits in							,		
exceed the allowable limit in									
instructions) - Open Deposito		XXX	XXX						XXX
0199999. Totals - Open Depo	sitories	XXX	XXX	0	0	(3,632,110)	(4,628,447)	(3,013,741)	XXX
0299998. Deposits in	depositories that do not								
exceed the allowable limit in									
instructions) - Suspended De	epositories	XXX	XXX						XXX
0299999. Totals - Suspended	Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Depo	osit	XXX	XXX	0	0	(3,632,110)	(4,628,447)	(3,013,741)	XXX
0499999. Cash in Company's	Office	XXX	XXX	XXX	XXX				XXX
									L
									·····
0599999. Total - Cash		XXX	XXX	0	0	(3,632,110)	(4,628,447)	(3,013,741)	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Chow	Investments	Ownad	End of	Curront	Ougstor	

		Onow invosting		nied Liid of Guiren		T			
1	2		3	4	5	6	7	8	9
							Book/Adjusted	Amount of Interest	Amount Received
CUSIP	Description	nn .	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
	I - U.S. Government Bonds		0000	Bato Aloquirou	riate of interest	Maturity Date	Ourrying value	0	~
	I - All Other Government Bonds						0	0	0
	I - U.S. States, Territories and Possessions Bonds						0	0	0
	I - U.S. Political Subdivisions Bonds						0	0	0
	FED HOME LN DISCOUNT NT			09/14/2018	2. 139	12/14/2018	2.488.999	0	2,070
2599999. Subto	otal - Bonds - U.S. Special Revenues - Issuer Obligations					, , , , , , , , , , , , , , , , , , , ,	2,488,999	0	2,070
3199999. Total	I - U.S. Special Revenues Bonds						2,488,999	0	·
3899999. Total	I - Industrial and Miscellaneous (Unaffiliated) Bonds						0	0	
	I - Hybrid Securities						0	0	0
	I - Parent, Subsidiaries and Affiliates Bonds						0	0	0
6099999. Subto	otal - SVO Identified Funds						0	0	0
	I - Issuer Obligations						2,488,999	0	2,070
7899999. Total	l - Residential Mortgage-Backed Securities						0	0	
7999999. Total	I - Commercial Mortgage-Backed Securities						0	0	0
8099999. Total	Commercial Mortgage-Backed Securities Other Loan-Backed and Structured Securities						0	0	0
8199999. Total	I - SVO Identified Funds						0	0	0
8399999. Total	Bonds						2,488,999	0	2,070
						·			
8800000 - Tota	al Cash Equivalents	•			•	•	2 488 999	0	2 070